PAGE 1 / 161 •

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) is changed) over the lines. NRCC 320 FIRST STREET SE ADDRESS (number and street) (Check if address is changed) WASHINGTON 20003 DC CITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS kdavis@hdafec.com (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) www.nrcc.org (Check if address is changed) DATE 05 2021 C00075820 FEC IDENTIFICATION NUMBER > 3. X OR IS THIS STATEMENT NEW (N) AMENDED (A) I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete. Davis, Keith A., , , Type or Print Name of Treasurer Davis, Keith A.,,, [Electronically Filed] 04 29 2021 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: **FEC FORM 1** Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only Local 202-694-1100

FEC	Form 1 (Revised 02/2009)	Page <b>2</b>
TYPE OF	COMMITTEE ate Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below.)	)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Cominformation below.)	plete the candidate
Name of Candidate		
Candidate Party Affi		State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party C	ommittee:	(Dama ayatia
(d)	This committee is a NAT (National, State or subordinate) committee of the REP	(Democratic, Republican, etc.) Party.
Politica	Action Committee (PAC):	
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its cor	nnected organization is a
	Corporation Wo Capital Stock	Labor Organization
	Membership Organization Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate se committee. (i.e., nonconnected committee)	egregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fu	ndraising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for to committees/organizations, at least one of which is an authorized committee of a federal candidate.	vo or more political
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two committees/organizations, none of which is an authorized committee of a federal candidate.	vo or more political
C	ommittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

Γ		コ
FEC Form 1 (Revis		Page <b>3</b>
Write or Type Committee N	lame	
NRCC		
6. Name of Any Connecte	ed Organization, Affiliated Committee, Joint Fundraising Representative,	or Leadership PAC Sponsor
COLE COMBINED	COMMITTEE	
Mailing Address	12176 CHANCERY STATION CIRCLE	
	RESTON	20190
	CITY STATE	ZIP CODE
	Affiliated Committee Joint Fundraising Representa	
	To the A	
Full Name	Keith A., , ,	
Mailing Address	320 First Street SE	
	Washington	20003
Title or Position	CITY STATE	ZIP CODE
Treasurer	Telephone number	202 429 - 7000
3. <b>Treasurer:</b> List the name any designated agent (e.	e and address (phone number optional) of the treasurer of the committee; g., assistant treasurer).	and the name and address of
Full Name Davis, of Treasurer	Keith A., , ,	
Mailing Address	320 First Street SE	
	Washington DC CITY STATE	20003   ZIP CODE
Title or Position Treasurer		202   -   429   -   7000

FEC Form	1 (Revised 02/2009)	Page <b>4</b>
Full Name of Designated Agent	Williams, Katy, , ,	
Mailing Address	320 First Street SE	
	Washington DC 20003 CITY STATE	ZIP CODE
Title or Position Assistant Treasu	rer Telephone number 202 – 4	229 - 7000
safety deposit box Name of Bank, De	Depositories: List all banks or other depositories in which the committee deposits funds, holds es or maintains funds. epository, etc.  Wells Fargo	accounts, rents
Mailing Address	1753 Pinnacle Drive	
	McLean VA 22102	
	CITY STATE	ZIP CODE
Name of Bank, De	epository, etc.	
Mailing Address	BB&T  1909 K Street NW	
	Washington DC 20006	

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Sponse
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Full Name	<u> </u>		
Full Name Mailing Address			
	CITY A	STATE A	ZIP CODE A
Mailing Address	CITY A	STATE   Telephone Number	ZIP CODE A
Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of the control o	pries: List all banks or other depositories in whi aintains funds.  Citizens Bank	Telephone Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite cafety deposit boxes or more states. First C	ories: List all banks or other depositories in whi aintains funds.	Telephone Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or make the safety	pries: List all banks or other depositories in whi aintains funds.  Citizens Bank  4400 Six Forks Road	Telephone Number	
Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or make the safety	pries: List all banks or other depositories in whi aintains funds.  Citizens Bank	Telephone Number	

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisi</b>	ng Participant:			
1.		FEC ID	number	С
2.		FEC ID	number	С
3.		FEC ID	number	C
4		FEC ID	number	C
Name of Any Connected	Organization, Affiliated Committee, Joi	nt Fundraising Rep	resentative,	or Leadership PAC Spons
Mailing Address	95 WHITE BRIDGE RD			
-	SUITE 207			
	NASHVILLE		TN	37205
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Full Name				
Mailing Address	1			
Mailing Address				
Mailing Address				
	CITY A		STATE A	ZIP CODE A
Mailing Address  TITLE OR POSITION	CITY A	Telephone No		ZIP CODE A
TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m	ories: List all banks or other depositories	Telephone No	ımber 🔲	
TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or manner of Bank, Common Depository, etc.	pries: List all banks or other depositories aintains funds.	Telephone No	ımber 🔲	

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b> r	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint F	Fundraising Representativ	re, or Leadership PAC Spons
KELLER VICTOR	RY COMMITTEE		
1			
Mailing Address	4031 THICKET LANE		
	1		
	HARRISBURG	ı PA	17110
Relationship:	CITY A	STATE A	ZIP CODE A
riciationismp.	OII I	SIAIL	ZIF CODE A
	d Organization	Joint Fundraising Represent	tative Leadership PAC Sp
			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – options		
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – options	al)	
esignated Agent: Identif  Full Name	y by name, address (phone number – options	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identif  Full Name	y by name, address (phone number – options  CITY   CITY   ries: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – options  CITY   CITY   ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	y by name, address (phone number – options  CITY   CITY   ries: List all banks or other depositories in w	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or materials and the control of Bank, Count	y by name, address (phone number – options  CITY   CITY   ries: List all banks or other depositories in waintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make ame of Bank, epository, etc.	y by name, address (phone number – options  CITY   CITY   ries: List all banks or other depositories in waintains funds.  ry Club Bank	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or make ame of Bank, epository, etc.	y by name, address (phone number – options  CITY   CITY   ries: List all banks or other depositories in waintains funds.  ry Club Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisin</b>	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
JUDGE CARTER	VICTORY FUND		
Mailing Address	22780 INDIAN CREEK DR.		
	SUITE 100		
	DULLES	VA VA	20166
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
	Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
		Fundraising Representa	Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or main arms of Bank, epository, etc.	by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	cies: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor dety deposit boxes or main arms of Bank, epository, etc.	cies: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundrais	ing Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fun	draising Representative	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 341027		
	AUSTIN	TX	78734
		STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joint	int Fundraising Representa	ative Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connect  Designated Agent: Ident	ed Organization Affiliated Committee		Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee Joint	int Fundraising Representa	
Connect  Designated Agent: Ident  Full Name	ed Organization Affiliated Committee Joint		Leadership PAC Spo
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION	ed Organization Affiliated Committee Joint	int Fundraising Representa	
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositions afety deposit boxes or necessity.	ed Organization	STATE A Telephone Number	ZIP CODE A
Connect  Designated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositions boxes or not be and the composition of Bank, Pirst  Depository, etc.	ed Organization	STATE A Telephone Number	ZIP CODE A  s funds, holds accounts, rents

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC ID number C  2.	h). <b>Joint Fundraisi</b> r	ng Participant:			
3.	1.			FEC ID number	С
4	2.			FEC ID number	С
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spr WIN IN 2020  Mailing Address  320 FIRST STREET SOUTHEAST  WASHINGTON  Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC  PAC  STATE ▲  ZIP CODE ▲  Tille OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Tille OR Positions: List all banks or other depositories in which the committee deposits funds, holds accounts, referly deposit boxes or maintains funds.  Bank of Nevada  appository, etc.  Mailing Address  8505 Centennial Parkway  Mailing Address  8505 Centennial Parkway  Mailing Address	3.			FEC ID number	С
Malling Address  320 FIRST STREET SOUTHEAST  WASHINGTON  Relationship:  CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization	4.			FEC ID number	C
Mailing Address  320 FIRST STREET SOUTHEAST  WASHINGTON  Pelationship:  CITY ▲  STATE ▲  ZIP CODE ▲  ZIP CODE ▲  STATE ★  ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC  Leadership PAC  Leadership PAC  Leadership PAC  STATE ▲  ZIP CODE ▲  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Title OR POSITION ▼  Telephone Number  Telephone Number  Mailing Address  Anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, refety deposit boxes or maintains funds.  Ame of Bank, Bank of Nevada  spository, etc.  Mailing Address	=	Organization, Affiliated Committee	, Joint Fundrais	ng Representative	e, or Leadership PAC Spor
Mailing Address  WASHINGTON  CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization					
Mailing Address  WASHINGTON  CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization					
Relationship: CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization Affiliated Committee Joint Fundraising Representative Leadership PAC  esignated Agent: Identify by name, address (phone number – optional)  Full Name Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number – Telephone Number – Telephone Number – Mailing Address  anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, relately deposit boxes or maintains funds.  Bank of Nevada epository, etc.  Mailing Address  8505 Centennial Parkway	Martine Address	320 FIRST STREET SOUTHEAST			
Relationship:  CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC  esignated Agent: Identify by name, address (phone number – optional)  Full Name	Mailing Address				
Relationship:  CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC  esignated Agent: Identify by name, address (phone number – optional)  Full Name		WASHINGTON		DC	20003
Connected Organization	B 1 11 11				
Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  Telephone Number  Telephone Number  Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, refety deposit boxes or maintains funds.  Bank of Nevada  Sepository, etc.  8505 Centennial Parkway  Mailing Address	Helationship:	CITY A		STATE A	ZIP CODE A
Full Name  Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Title OR POSITION ▼ Telephone Number  Telephone Number  Telephone Number  Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, refety deposit boxes or maintains funds.  Bank of Nevada  State ▲ ZIP CODE ▲  Telephone Number  Bank of Nevada  State A Sta	esignated Agent: Identif	y by name, address (phone number -	- optional)		
Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number — — — — — — — — — — — — — — — — — — —			. ,		
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number  —  anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, relety deposit boxes or maintains funds.  ame of Bank, Bank of Nevada  apository, etc.  8505 Centennial Parkway  Mailing Address					
TITLE OR POSITION   CITY   Telephone Number  Tel		1			
TITLE OR POSITION   CITY   Telephone Number  Tel					
Telephone Number  Telephone Nu					
anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, restricted deposit boxes or maintains funds.  Amme of Bank, Bank of Nevada depository, etc.  Mailing Address  8505 Centennial Parkway					
afety deposit boxes or maintains funds.  ame of Bank, Bank of Nevada epository, etc.  Mailing Address  8505 Centennial Parkway	Mailing Address	CITY A			
epository, etc.    8505 Centennial Parkway	Mailing Address	CITY A	1	STATE A	
Mailing Address  8505 Centennial Parkway	Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail	CITY A  pries: List all banks or other deposito aintains funds.	Telep	STATE ▲	ZIP CODE A
Las Vegas   NV    89149   _	Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or management of Bank, Bank (	CITY A  ories: List all banks or other deposito aintains funds.	Telep	STATE ▲	ZIP CODE A
Las Vegas       NV    89149	Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank, epository, etc.	ories: List all banks or other deposito aintains funds.  of Nevada	Telep	STATE ▲	ZIP CODE A
	Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	ories: List all banks or other deposito aintains funds.  of Nevada	Telep	STATE ▲	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	5132 N PALM AVE		
	NUM 227		
	FRESNO	CA	93704
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		t Fundraising Representa	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Spo
Connecte  Designated Agent: Identi	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee Join Join Market		
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address	Affiliated Committee  Affiliated Committee  Figure 1. Join 1. Join 2.		
Connected  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposites safety deposit boxes or make the connected agents.	Affiliated Committee  Affiliated Committee  Typical Distriction  Typical Distriction  Affiliated Committee  Typical Distriction  Affiliated Committee  Typical Distriction  T	STATE A	ZIP CODE A
Connected  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or management of Bank, Depository, etc.	Affiliated Committee  Affiliated Committee  Figure 1	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundrais HOUSE CALIFORNIA 2020	ing Representative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	ndraising Representa	
8.	Designated Agent: Identify	/ by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	•		ZIP CODE A
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, First N	Telepries: List all banks or other depositories in which the	STATE A	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.	STATE A	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank, First N	ries: List all banks or other depositories in which the aintains funds.  ational Bank	STATE A	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.  ational Bank  3015 Glimcher Boulevard	STATE A hone Number committee deposit	s funds, holds accounts, rents
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.  ational Bank	STATE A	

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	FEC ID number	С
	FEC ID number	С
	FEC ID number	С
	FEC ID number	С
Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
2020		1 1 1 1 1 1 1 1
	MD	20824
CITY A	STATE ▲	ZIP CODE ▲
	Fundraising Representa	Leadership PAC S
one number – optional)		
CITY A	STATE ▲	ZIP CODE ▲
	elephone Number	
ther depositories in which	the committee deposit	s funds, holds accounts, ren
1		

FEC Form 1S (Revised 02/2017)

r(h). <b>Joint Fundraisin</b>	g Participant:				
1.			FEC	ID number	С
2			FEC	ID number	C
3.			FEC	ID number	С
4.			FEC	ID number	C
Name of Any Connected LONG TEAM	Organization, Affi	iliated Committee, Joint Fo	undraising R	epresentativ	e, or Leadership PAC Sponso
Mailing Address	P.O. BOX 3864				
	SPRINGFIELD		1	MO	65808
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connected	d Organization	Affiliated Committee	Joint Fundraisi	ng Represent	ative Leadership PAC Spor
Full Name					
Mailing Address					
Mailing Address		CITY A		STATE A	ZIP CODE A
		CITY A	Telephone	STATE A	ZIP CODE A
Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail	ries: List all banks			STATE A	ZIP CODE A  ss funds, holds accounts, rents
Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main management of Bank, Depository, etc.	ries: List all banks aintains funds. unties Bank			STATE A	

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisi</b> n	g Participant:		
1		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundrai	ising Representative	e, or Leadership PAC Sponsor
AUSTIN SCOTT	VICTORY FUND		
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponso
Full Name	y by name, address (phone number – optional)		
Mailing Address			
	CITY ▲	STATE A	ZIP CODE A
TITLE OR POSITION	V CITY A	SIAIE A	ZIP CODE A
	Tele	ephone Number	
Banks or Other Deposito safety deposit boxes or matching the Name of Bank, Depository, etc.		ne committee deposit	s funds, holds accounts, rents
Mailing Address	2700 Cahaba Village Plaza		
	Birmingham	AL	35243

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ng rantopant.		
1.		FEC ID number	С
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
MAJORITY RISI	NG 		
Mailing Address	P.O. BOX 30844		
	1		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		oint Fundraising Represent	ative Leadership PAC Sp
Designated Agent: Identi	ed Organization Affiliated Committee X June 1985 June 1985 Affiliated Committee X June 1985 June		ative Leadership PAC Spo
			ative Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi			Leadership PAC Spo
Designated Agent: Identi  Full Name    Mailing Address	fy by name, address (phone number – optional)		Leadership PAC Spo
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)		
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identical Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositions afety deposit boxes or make the safety deposit boxes or make th	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white anintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identical Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositions afety deposit boxes or make the safety deposit boxes or make th	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white anintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white naintains funds.  Iin Synergy Bank	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in white naintains funds.  Iin Synergy Bank	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) o	r(h). <b>Joint Fundraisin</b>	g Participant:	
	1.		FEC ID number
	2		FEC ID number
	3.		FEC ID number C
	4		FEC ID number
6.	Name of Any Connected TEAM MURPHY	Organization, Affiliated Committee, Joint Fundraisi	ng Representative, or Leadership PAC Sponsor
	Mailing Address	PO BOX 97275	
		RALEIGH 	NC 27624
	Relationship:	CITY ▲	STATE ▲ ZIP CODE ▲
	Connected	d Organization Affiliated Committee	draising Representative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)	
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)	
8.		by name, address (phone number – optional)	
8.	Full Name	by name, address (phone number – optional)	
8.	Full Name	by name, address (phone number – optional)	
8.	Full Name	CITY A	STATE A ZIP CODE A
8.	Full Name	CITY A	
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main	CITY   CITY   Teleph  Tries: List all banks or other depositories in which the aintains funds.	STATE A ZIP CODE A
9.	Full Name Mailing Address  TITLE OR POSITION	CITY   CITY   Teleph  Tries: List all banks or other depositories in which the aintains funds.	STATE A ZIP CODE A
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or ma	CITY   CITY   Teleph  Tries: List all banks or other depositories in which the aintains funds.	STATE A ZIP CODE A
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main main management of Bank, Depository, etc.	CITY   CITY   Teleph  ries: List all banks or other depositories in which the aintains funds.  Bank	STATE A ZIP CODE A
9.	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main main management of Bank, Depository, etc.	CITY   CITY   Teleph  ries: List all banks or other depositories in which the aintains funds.  Bank	STATE A ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	g Participant:		
1	F	EC ID number	С
2.		EC ID number	С
3.		EC ID number	C
4.	, , , , , , , , , , , , , , , , , , ,	EC ID number	C
S. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising	g Representative	e, or Leadership PAC Sponsor
HUDSON VICTOR	RY FUND		
Mailing Address	824 S. MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE ▲
	by name, address (phone number – optional)		
Full Name			
Mailing Address			
Mailing Address			
Mailing Address			
Mailing Address  TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	<b>V</b>	STATE A	ZIP CODE A
TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the c	one Number	

FEC Form 1S (Revised 02/2017)

5(g) o	or(h). <b>Joint Fundraisin</b>	g Participant:			
-	1.	- -	FEC	ID number	C
	2.		FEC	ID number	C
	3.		FEC	ID number	C
	4.		FEC	ID number	C
6.		Organization, Affiliated Committee, Jo	oint Fundraising R	epresentative	e, or Leadership PAC Sponsor
	TEAM BUDDY				
		1 824 S. MILLEDGE AVE			
	Mailing Address	SUITE 101			
					20005
	Balana	ATHENS		GA	30605
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	I Organization Affiliated Committee	✗ Joint Fundrais	ing Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – o	ptional)		
	Full Name				
	Mailing Address				
		0.000			
	TITLE OR POSITION	▼ CITY ▲		STATE A	ZIP CODE ▲
			Telephone	Number	
•					
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories intains funds.	in which the comi	mittee deposits	s funds, holds accounts, rents
	Name of Bank, First Fi	nancial Bank			
	Depository, etc.	405 Ord Otto et			
	Mailing Address	125 3rd Street			
		Columbus		OH	47201
ı		CITY ▲		STATE ▲	ZIP CODE ▲

FEC Form 1S (Revised 02/2017)

)) or(h). <b>Joint Fundraisi</b> n	ng Particinant		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected NORTH TO THE	Organization, Affiliated Committee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 2814		
	SEWARD	AK	99664
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	d Organization Affiliated Committee	ındraising Representa	tive Leadership PAC Sponso
Full Name	y by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
	I	phone Number	
Banks or Other Deposito safety deposit boxes or ma		committee deposite	s funds, holds accounts, rents
Depository, etc.	Bank 		
	Bank    South Main Street		
Depository, etc.			
Depository, etc.		UT	84133

FEC Form 1S (Revised 02/2017)

5(g) or (h). <b>J</b>	oint Fundraising	Participant:				
1.				FEC IE	number	C
2. 🔟				FEC IE	number	C
3.				FEC ID	number	C
4.				FEC II	) number	С
	Any Connected O		ed Committee, Joint Fu	undraising Rep	oresentative	e, or Leadership PAC Sponsor
Mailiı	ng Address	1661 AARON BREN	NNER DR			
		MEMPHIS			TN I	38120
Relat	tionship:		CITY A		STATE A	ZIP CODE A
	Connected C	Organization Af	iliated Committee	Joint Fundraising	g Representa	ative Leadership PAC Sponso
8. <b>Designate</b>	d Agent: Identify b	y name, address (p	hone number – optional	)		
8. <b>Designated</b> Full Na		y name, address (p	hone number – optional	<b>)</b>		
Full Na		oy name, address (p	hone number – optional	<b>)</b>		
Full Na	ame	oy name, address (p	hone number – optional	)) 		
Full Na	ame		hone number – optional			
Full Na Mailing	ame				STATE A	ZIP CODE A
Full Na Mailing	ame					
Full Na  Mailing  TITLE  Banks or esafety depo	Address  OR POSITION  Other Depositorie osit boxes or main sank, Flagstar	es: List all banks or tains funds.	CITY A	Telephone N	umber	
Full Na Mailing  TITLE  Banks or esafety depository,	Address  OR POSITION  Other Depositorie osit boxes or main etc.	es: List all banks or tains funds.	CITY   other depositories in wh	Telephone N	umber	ZIP CODE 🛦
Full Na Mailing  TITLE  Banks or esafety depository,	Address  OR POSITION  Other Depositorie osit boxes or main etc.	es: List all banks or tains funds.	CITY   other depositories in wh	Telephone N	umber	ZIP CODE 🛦
Full Na Mailing  TITLE  Banks or esafety depository,	Address  OR POSITION  Other Depositorie osit boxes or main etc.	es: List all banks or tains funds.	CITY   other depositories in wh	Telephone N	umber	ZIP CODE 🛦

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ig i artiolpanti		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
MALLIOTAKIS V	ICTORY COMMITTEE		
Mailing Address	PO BOX 68		
	SOUTH SALEM	NY	10590
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi	Affiliated Committee Journal J	int Fundraising Represent	ative Leadership PAC Spo
		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi		int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi  Full Name    Mailing Address	fy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC Spo
Designated Agent: Identi	fy by name, address (phone number – optional)  CITY		
Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposites safety deposit boxes or management.	cories: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A Telephone Number	ZIP CODE A
Pesignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which aintains funds.  11 West 23rd Street	STATE   Telephone Number  th the committee deposit	ZIP CODE   ZIP code   ts funds, holds accounts, rents
Pesignated Agent: Identic Full Name	cories: List all banks or other depositories in whice aintains funds.	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

g) or (h).	Joint Fundraising	Participant:			
1.			FEC I	D number	C
2.			FEC I	D number	C
3.			FEC I	D number	С
4.			FEC I	D number	C
	of Any Connected (	Organization, Affiliated Committee, Joir	nt Fundraising Re	presentative	e, or Leadership PAC Sponsor
1	Mailing Address	PO BOX 2485			
				- , ,	
		SPRINGFIELD		L VA	22152
F	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	nated Agent: Identify	by name, address (phone number – opt	onal)		
Fu		by name, address (phone number – opt	ional)		
Fu	III Name	by name, address (phone number – opt	ional)		
Fu	III Name	by name, address (phone number – opt			
Fu Ma	III Name	CITY		STATE A	ZIP CODE A
Fu Ma	all Name	CITY			
Fu Ma	ailing Address  ITLE OR POSITION  or Other Depositor deposit boxes or main of Bank, itory, etc.	CITY A	Telephone N	lumber	ZIP CODE A
Fu Ma	ailing Address  ITLE OR POSITION  or Other Depositor deposit boxes or main of Bank, First Na	CITY   cies: List all banks or other depositories intains funds.  ational Bank of Tennessee	Telephone N	lumber	ZIP CODE A
Fu Ma	ailing Address  ITLE OR POSITION  or Other Depositor deposit boxes or main of Bank, itory, etc.	CITY   cies: List all banks or other depositories intains funds.  ational Bank of Tennessee	Telephone N	lumber	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

or(h). <b>Joint Fundraisir</b>	ng Participant:		
1		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fundrai FIRST	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	C/O RED CURVE SOLUTIONS		
	138 CONANT STREET 2ND FLOOR		
	BEVERLY	MA	01915
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connecte	d Organization	undraising Representa	tive Leadership PAC Sponso
Designated Agent: Identify	y by name, address (nhone number – ontional)		
Designated Agent: Identify  Full Name	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositors afety deposit boxes or maintain the same of the same	CITY   Tele  ries: List all banks or other depositories in which the aintains funds.  Gulf Bank	STATE ▲	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositors afety deposit boxes or main safety deposit boxes or main sa	CITY   Tele  ries: List all banks or other depositories in which the aintains funds.  Gulf Bank  900 Town & Country Lane	STATE ▲	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   Tele  ries: List all banks or other depositories in which the aintains funds.  Gulf Bank  900 Town & Country Lane  Suite 100	STATE A	s funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	CITY   Tele  ries: List all banks or other depositories in which the aintains funds.  Gulf Bank  900 Town & Country Lane	STATE ▲	

FEC Form 1S (Revised 02/2017)

5(g) (	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	С
6.	Name of Any Connected BANKS VICTORY	Organization, Affiliated Committee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	ndraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telep	hone Number	
9.	Name of Bank, First B		committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	aintains funds.	committee deposit	s funds, holds accounts, rents
9.	Name of Bank, First B	aintains funds.  ank	committee deposit	s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ank  1817 West End Avenue		
9.	Name of Bank, Depository, etc.	aintains funds.  ank	committee deposit	s funds, holds accounts, rents

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_161\_\_

(h). <b>Joint Fundraisir</b>	3 ·		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
KIM VICTORY FU	JND		
Mailing Address	9460 TEGNER ROAD		
	HILMAR	CA	95324
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint	Fundraising Representa	Leadership PAC Sp
	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor afety deposit boxes or mailing and a graph of Bank, Independent of B	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which faintains funds.	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which taintains funds.	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which faintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
	d Organization, Affiliated Committee, Joint Fundra	nising Representative	e, or Leadership PAC Sponsor
Mailing Address	228 S WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Spon
Designated Agents Identi			
Designated Agent: Identi	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A		ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m  Name of Bank, Suncr	CITY ▲  CITY ▲  Tel  ories: List all banks or other depositories in which telepositories in which it was a proper which it which it which it was a proper which it was a proper which it was a proper	STATE ▲ ephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	CITY ▲  CITY ▲  Tel  ories: List all banks or other depositories in which the naintains funds.	STATE ▲ ephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m  Name of Bank, Suncr	CITY ▲  CITY ▲  Tel  cories: List all banks or other depositories in which the traintains funds.  Test Bank	STATE ▲ ephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	CITY ▲  CITY ▲  Tel  ories: List all banks or other depositories in which that the properties of the	STATE A ephone Number he committee deposits	s funds, holds accounts, rents
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or make the safety deposit boxes or make the safety depository, etc.	CITY ▲  CITY ▲  Tel  cories: List all banks or other depositories in which the traintains funds.  Test Bank	STATE ▲ ephone Number	

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
PARNELL VICTO	DRY COMMITTEE		
Mailing Address	PO BOX 1488		
	CRANBERRY TOWNSHIP	PA	16066
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee X Jointy Jointy by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC Sp
		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or m	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identic Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.  CERTAL	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r		FEC ID number	C
1.		FEC ID number	С
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
FORT VICTORY	_		
Mailing Address	332 W LEE HWY		
Maining Addiess	#303		
	WARRENTON	VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	d Organization Affiliated Committee Joint Joint y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Spanisher
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material deposit boxes.	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material deposit boxes.	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which aintains funds.  Ifield First Community Bank	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telestries: List all banks or other depositories in which aintains funds.  Ifield First Community Bank	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisin</b>	g Participant:		0
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
GIMENEZ VICTO	Organization, Affiliated Committee, Joint Fund RY COMMITTEE	raising Representative	e, or Leadership PAC Spons
Mailing Address	824 S MILLEDGE AVE STE 101		
Maining / Mainoss			
	ATHENS	, GA	30605
D 1 11 11			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Full Name			
Full Name			
Mailing Address	CITY A	STATE A	ZIP CODE A
	•	STATE A elephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) d	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected BURGESS VICTO	Organization, Affiliated Committee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 30844		
		BETHESDA	MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	ndraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE A	ZIP CODE A
	TITLE OR POSITION	•		ZIP CODE A
9.	Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which the	STATE A	
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.	STATE A	
9.	Banks or Other Deposito safety deposit boxes or ma	ries: List all banks or other depositories in which the aintains funds.  Rim Bank	STATE A	
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.  Rim Bank  P.O. Box 241489	STATE A shone Number committee deposit	s funds, holds accounts, rents
9.	Banks or Other Deposito safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the aintains funds.  Rim Bank	STATE A	

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b> r	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
RESCHENTHALI	ER VICTORY FUND		
Mailing Address	824 S MILLEDGE AVE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)		
	y by name, address (phone number – optional)		
Full Name	y by name, address (phone number – optional)		
Full Name			
Full Name Mailing Address	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name Mailing Address  TITLE OR POSITION	CITY A	elephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	CITY A  Te  pries: List all banks or other depositories in which	elephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite dafety deposit boxes or mame of Bank, People	CITY A  Te  pries: List all banks or other depositories in which	elephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or m	CITY ▲  CITY ▲  Te  pries: List all banks or other depositories in which aintains funds.  e's United Bank	elephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite dafety deposit boxes or mame of Bank, People	CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  Te  pries: List all banks or other depositories in which aintains funds.  e's United Bank	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  Te  pries: List all banks or other depositories in which aintains funds.  e's United Bank	elephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(g) or (h). Joint Fundraisin	g Participant:		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	I Organization Affiliated Committee X Joint I	Fundraising Representa	ative Leadership PAC Sponso
	by name, address (phone number – optional)		
		1 1 1 1 1 1	
Designated Agent: Identify			
Designated Agent: Identify			
Designated Agent: Identify	by name, address (phone number – optional)		
Full Name Mailing Address	by name, address (phone number – optional)		ZIP CODE A
Designated Agent: Identify	by name, address (phone number – optional)  CITY		
Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail	ries: List all banks or other depositories in which thintains funds.	STATE A ephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mailing Name of Bank, Pinnac	continuous problems of the positories in which the intains funds.	STATE A ephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main safety depository, etc.  Pinnac	ries: List all banks or other depositories in which thintains funds.	STATE A ephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisir</b>	ig Farticipant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
4.			
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
HERN VICTORY	FUND		
Mailing Address	8630 S PEORIA AVE		
	1		
	TULSA	OK	74132
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee Y Join  y by name, address (phone number – optional)	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	STATE A	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   T	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification of Bank, Tri Co	y by name, address (phone number – optional)  CITY   CITY   ries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor  afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   CITY   Tries: List all banks or other depositories in which aintains funds.  unties Bank	STATE A	ZIP CODE A
esignated Agent: Identification of Bank, Tri Co	y by name, address (phone number – optional)  CITY   CITY   Pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Tries: List all banks or other depositories in which aintains funds.  unties Bank	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Tries: List all banks or other depositories in which aintains funds.  unties Bank	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

or(h). <b>Joint Fundraising</b>	g Participant:		
1	 	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
=	Organization, Affiliated Committee, Joint Fundr	raising Representative	, or Leadership PAC Sponsor
Mailing Address	PO BOX 2485		
	SPRINGFIELD	VA	22152
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Organization Affiliated Committee Joint by name, address (phone number – optional)	: Fundraising Representa	tive Leadership PAC Spon
Full Name			
Mailing Address			
Mailing Address			
·	CITY ▲	STATE A	ZIP CODE A
Mailing Address  TITLE OR POSITION	•	STATE A	ZIP CODE <b>A</b>
TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or ma	Tes: List all banks or other depositories in which	elephone Number	
Banks or Other Depositor safety deposit boxes or ma Name of Bank, Depository, etc.	ries: List all banks or other depositories in which intains funds.	elephone Number	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
(0)	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	JEANNE VICTOR	RY FUND		
		DO DOM 00044		
	Mailing Address	PO BOX 30844		
		BETHESDA	MD MD	20824
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number – optional)		
	Full Name			
	Full Name			
	Mailing Address	CITY A	STATE A	ZIP CODE A
		•		ZIP CODE <b>A</b>
	Mailing Address	•	STATE A ephone Number	ZIP CODE <b>A</b>
9.	Mailing Address  TITLE OR POSITION  Banks or Other Deposito	ries: List all banks or other depositories in which t	ephone Number	
9.	Mailing Address  TITLE OR POSITION	ries: List all banks or other depositories in which t	ephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Deposito	ries: List all banks or other depositories in which taintains funds.	ephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, US Ba	ries: List all banks or other depositories in which taintains funds.	ephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	ries: List all banks or other depositories in which taintains funds.  nk	ephone Number	
9.	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	ries: List all banks or other depositories in which taintains funds.  nk	ephone Number	

FEC Form 1S (Revised 02/2017)

n). <b>Joint Fundraising</b>	Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected (	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spor
OBERWEIS VICTO	ORY COMMITTEE		
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number – optional)		
	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY		
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or mailed mame of Bank, Amarillo	CITY A  ies: List all banks or other depositories in which	STATE ▲  Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorifety deposit boxes or mail	CITY   CITY   ies: List all banks or other depositories in which ntains funds.	STATE ▲  Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositoring the deposit boxes or mailing the depository, etc.	CITY   CITY   ies: List all banks or other depositories in which ntains funds.  D National Bank	STATE ▲  Telephone Number	
Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositoring the deposit boxes or mailing the depository, etc.	CITY   CITY   ies: List all banks or other depositories in which ntains funds.  D National Bank	STATE ▲  Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(a)	or(h). <b>Joint Fundraisir</b>	ng Participant:		
- (3)	1.	· · · · · · · · · · · · · · · · · · ·	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
			FEC ID number	C
	4			
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
		EXAS VICTORY FUND		
	Mailing Address	PO BOX 30844		
		BETHESDA	, MD I	20824
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connecte	d Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identif	y by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
			1 1 . 1	1
		CITY ▲	STATE ▲	ZIP CODE ▲
	TITLE OR POSITION	. ▼	1	1=1 1=1 1
		le	lephone Number	
9.	Panks or Other Denosits	ories: List all banks or other depositories in which	the committee denocit	a funda halda accounta ronta
Э.	safety deposit boxes or ma		the committee deposit	s runus, riolus accounts, rems
		way Bank		
	Depository, etc.	P.O. Box 17001		
	Mailing Address			
		San Antonio	TX TX	78217

FEC Form 1S (Revised 02/2017)

safety deposit boxes or mai			nich the commi	ttee deposit	s funds, holds accounts, rents
safety deposit boxes or mai	ntains funds.	or other depositories in w	nich the commi	ttee deposit	s funds, holds accounts, rents
		or other depositories in w	nich the commi	ttee deposit	s funds, holds accounts, rents
_			Telephone N	umber	
TITLE OR POSITION	<b>V</b>	CITY A		STATE A	ZIP CODE ▲
					1
5 200		1 1 1 1 1 1 1 1			
Mailing Address					1 1 1 1 1 1 1 1 1
Designated Agent: Identify  Full Name	by name, address (	(phone number – optiona	<b>i)</b>		
Connected	Organization A	Affiliated Committee	Joint Fundraisin	g Representa	Leadership PAC Spor
Relationship:		CITY ▲		STATE A	ZIP CODE ▲
<b>D</b> 1	BETHESDA			MD	20824
Mailing Address	PO BOX 30844				
Name of Any Connected (	Organization, Affilia	ated Committee, Joint F	undraising Re <sub>l</sub>	oresentative	e, or Leadership PAC Sponso
4.				Tidilibei	<u> </u>
3.			J	number number	C
			_	number	C
2.			_	number .	C

FEC Form 1S (Revised 02/2017)

1.			FEC ID	number	C
2.			FEC ID	number	С
3.			FEC ID	number	C
4.			FEC ID	number	С
ame of Any Connected	Organization, Af	ffiliated Committee, Joint F	undraising Repr	esentative	e, or Leadership PAC Spons
STEEL VICTORY	' FUND			1 1 1	
Mailing Address	9070 IRVINE (	CENTER DRIVE #150			
				CA	92618
	IRVINE				
Relationship:		CITY ▲  Affiliated Committee	Joint Fundraising	STATE A	ZIP CODE ▲ ative Leadership PAC Sp
Connected	d Organization		Joint Fundraising		
Connected	d Organization	Affiliated Committee	Joint Fundraising		
Connected esignated Agent: Identify	d Organization	Affiliated Committee	Joint Fundraising		
esignated Agent: Identify	d Organization	Affiliated Committee	Joint Fundraising		
esignated Agent: Identify	d Organization  y by name, addre	Affiliated Committee x	Joint Fundraising		Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization  y by name, addre	Affiliated Committee x	Joint Fundraising		
esignated Agent: Identify	d Organization  y by name, addre	Affiliated Committee	Joint Fundraising	Representa	ative Leadership PAC Sp

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 41 of 161

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
		,	
Name of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representative	e, or Leadership PAC Spons
SMUCKER VICT	ORY COMMITTEE		
	224 2 MILLED OF AVE OFF 464		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecto		oint Fundraising Represent	ative Leadership PAC Spo
Connect	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Connecte  Connecte  Connecte  Connecte  Connecte	ed Organization Affiliated Committee		ative Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee   Affiliated Committee   J  T  T  T  T  T  T  T  T  T  T  T  T		Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee   Affiliated Committee   J  T  T  T  T  T  T  T  T  T  T  T  T		
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  Affiliated Committee  Type by name, address (phone number – optional)  CITY	STATE A	
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Agent: Identi	Affiliated Committee  fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or markets	Affiliated Committee  Affiliated Committee  Type by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in what in a funds.	STATE A Telephone Number	ZIP CODE A
Connecte  Designated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or markets	Affiliated Committee  fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposit bases or many deposit boxes or many deposit boxes or many deposit boxes or many deposit boxes.	Affiliated Committee  Affiliated Committee  Type by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in what in a funds.	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or management of Bank, Depository, etc.	Affiliated Committee  fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in what naintains funds.  Of Santa Clarita	STATE A Telephone Number	ZIP CODE A
Connected Designated Agent: Identify Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or management of Bank, Depository, etc.	Affiliated Committee  fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in what naintains funds.  Of Santa Clarita	STATE A Telephone Number	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisin</b>			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
•	PENNSYLVANIA		· · ·
Mailing Address	824 S MILLEDGE AVE		
-	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee X Joint  by by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Ative Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Ative Leadership PAC Sp
esignated Agent: Identif	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	by name, address (phone number – optional)  CITY		
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposito afety deposit boxes or mail	ries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor defety deposit boxes or mail ame of Bank, epository, etc.	ries: List all banks or other depositories in which aintains funds.    Solution   Parkway   Park	STATE A elephone Number the committee deposit	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor detects deposit boxes or mail ame of Bank, epository, etc.	ries: List all banks or other depositories in which saintains funds.	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
BIG DAN RODIM	ER VICTORY COMMITTEE		
1			
Mailing Address	50 S JONES BLVD STE 201		
	1		
	LAS VEGAS	, NV	89107
Relationship:	CITY A	STATE A	ZIP CODE A
rielationship.	CITY A	SIAIE	ZIP CODE
	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identii  Full Name    Mailing Address	y by name, address (phone number – optional)	Fundraising Representa	
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identif	by by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or magnetic deposition.	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or magnetic deposition.	y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, Bank	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.  of America	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.  of America	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r	ng Participant:				
1.			FEC ID	number	С
2.			FEC ID	number	С
3.			FEC ID	number	С
4.			FEC ID	number	С
	_	ated Committee, Joint Fo	undraising Repr	esentative	e, or Leadership PAC Spons
HOUSE VICTOR	Y FUND			1 1 1	
	2010 OUDTIO OTT				
Mailing Address	2318 CURTIS STF	KEE1			
	DENVER			CO	80205
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connecte	d Organization	Affiliated Committee	Joint Fundraising	Representa	ative Leadership PAC Sp
		Affiliated Committee		Representa	ative Leadership PAC Sp
				Representa	ative Leadership PAC Sp
esignated Agent: Identif				Representa	ative Leadership PAC Sp
esignated Agent: Identif				Representa	ative Leadership PAC Sp
esignated Agent: Identif	y by name, address (	(phone number – optiona		Representa	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (	(phone number – optiona		Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (	(phone number – optiona		TATE A	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (	(phone number – optiona	) 	TATE A	
esignated Agent: Identif  Full Name	y by name, address of the state	(phone number – optiona	ST Telephone Nur	TATE  mber	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor  afety deposit boxes or mail	y by name, address of the state	(phone number – optiona	ST Telephone Nur	TATE  mber	ZIP CODE A
esignated Agent: Identif  Full Name	y by name, address of the state	(phone number – optiona	ST Telephone Nur	TATE  mber	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address of the state	(phone number – optiona	ST Telephone Nur	TATE  mber	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposited afety deposit boxes or mailing and grants are of Bank, Suntru	y by name, address of the state	(phone number – optiona	ST Telephone Nur	TATE  mber	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address of the state	(phone number – optiona	ST Telephone Nur	TATE  mber	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). <b>Joint Fundraising</b>	Participant:		0
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected (	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spor
NANCY MACE VIO	CTORY FUND		
Mailing Address	228 S. WASHINGTON ST.		
	STE. 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected		nt Fundraising Representa	ative Leadership PAC S
	by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name		t Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name			Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Depositor fety deposit boxes or mail	by name, address (phone number – optional)  CITY   CITY   es: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or main arme of Bank, Popository, etc.	by name, address (phone number – optional)  CITY   CITY   es: List all banks or other depositories in which ntains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mai	by name, address (phone number – optional)  CITY   CITY   es: List all banks or other depositories in which ntains funds.  Al City Bank	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or main arme of Bank, Popository, etc.	by name, address (phone number – optional)  CITY   CITY   es: List all banks or other depositories in which ntains funds.  Al City Bank	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1. FEC ID number C 2. FEC ID number C 3. FEC ID number C 4. FEC ID number C  Was a series of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC VICTORIA VICTORY FUND  Mailing Address  824 S MILLEDGE AVE STE 101	Sponsor
3. FEC ID number C 4. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC VICTORIA VICTORY FUND	Sponsor
A. FEC ID number  C. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC VICTORIA VICTORY FUND  1.824 S. MILLEDGE AVE STE 101	Sponsor
A. FEC ID number  C. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC VICTORIA VICTORY FUND  1.824 S. MILLEDGE AVE STE 101	Sponsor
VICTORIA VICTORY FUND	Sponsor
Mailing Address  824 S MILLEDGE AVE STE 101	
Mailing Address  824 S MILLEDGE AVE STE 101	
Mailing Address	
ATHENS  GA 30605  ——————————————————————————————————	
Relationship: CITY ▲ STATE ▲ ZIP CODI	
Connected Organization Affiliated Committee Solution Joint Fundraising Representative Leadership F	AC Sponsor
3. Designated Agent: Identify by name, address (phone number – optional)  Full Name	1 1 1
Mailing Address	
Mailing Address	
TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE	<b>A</b>
	s, rents
Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds account safety deposit boxes or maintains funds.  Name of Bank, Depository, etc.  Mailing Address  Suite 310  Reston  VA   20191	

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
MIKE GARCIA V	ICTORY FUND		
1			
Mailing Address	9070 IRVINE CENTER DRIVE #150		
	IRVINE	CA	92618
Relationship:	CITY ▲	STATE A	ZIP CODE A
		nt Fundraising Representa	
esignated Agent: Identi	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	fy by name, address (phone number – optional)		
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name	CITY A	1	
Full Name Mailing Address  TITLE OR POSITION	CITY A  CITY A  pries: List all banks or other depositories in which	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and mailing a	CITY A  CITY A  pries: List all banks or other depositories in which aintains funds.	Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or mame of Bank, Bank	CITY A  CITY A  pries: List all banks or other depositories in which	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	CITY A  CITY A  pries: List all banks or other depositories in which aintains funds.	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, Bank	CITY A  CITY A  pries: List all banks or other depositories in which aintains funds.  of America	Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY ▲  CITY ▲  CITY A   Pries: List all banks or other depositories in which raintains funds.  Of America  31531 Santa Margarita Parkway	Telephone Number	ZIP CODE   S funds, holds accounts, ren
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	CITY A  CITY A  pries: List all banks or other depositories in which aintains funds.  of America	Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

n). <b>Joint Fundraisi</b> r	ıg Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fu	undraising Representati	ve, or Leadership PAC Spor
JERRY CARL VI	CTORY COMMITTEE		
Mailing Address	PO BOX 852138		
	MOBILE	AL	36685
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee	Joint Fundraising Represen	tative Leadership PAC S
			tative Leadership PAC S
esignated Agent: Identif			tative Leadership PAC S
esignated Agent: Identif			tative Leadership PAC S
esignated Agent: Identif			tative Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or ma	y by name, address (phone number – optional  CITY   CITY   pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank, Comm	y by name, address (phone number – optional  CITY   CITY   ories: List all banks or other depositories in wh	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank, Comm	y by name, address (phone number – optional  CITY   CITY   pries: List all banks or other depositories in whaintains funds.	STATE A Telephone Number	ZIP CODE A
Full Name	y by name, address (phone number – optional CITY A  CITY A  pries: List all banks or other depositories in whaintains funds.  nunity Bank of Mississippi	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 49 of 161

5(g) o	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		EC ID number	C
	2.			
	3.	FI	EC ID number	C
	4.	FI	EC ID number	C
6.	=	Organization, Affiliated Committee, Joint Fundraising	g Representative	e, or Leadership PAC Sponsor
	Mailing Address	370 EAST SOUTH TEMPLE STE 580		
		SALT LAKE CITY	UT	84111
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	raising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number - optional)		
	Full Name			
	Full Name			
		CITY A	STATE A	ZIP CODE A
	Mailing Address	•		ZIP CODE A
	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, First C	ries: List all banks or other depositories in which the co	STATE ▲	
	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	ries: List all banks or other depositories in which the caintains funds.	STATE ▲	
	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or mail Name of Bank, First C	ries: List all banks or other depositories in which the caintains funds.  apital Bank of Texas	STATE ▲	
	Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main safety deposit boxes or main safety depository, etc.	ries: List all banks or other depositories in which the calintains funds.  apital Bank of Texas	STATE ▲	

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisi	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	C
Name of Any Connected	I Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
LI LOGER VIOTA			
Mailing Address	PO BOX 30844		
	BETHESDA	MD MD	20824
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte		nt Fundraising Representa	ative Leadership PAC Spo
Connecte	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identi	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	ed Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name	Affiliated Committee	nt Fundraising Representa	Leadership PAC Spo
Connecte  Designated Agent: Identi  Full Name  Mailing Address	Affiliated Committee  X Join  fy by name, address (phone number – optional)  CITY		
Connected Designated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  Banks or Other Deposit safety deposit boxes or mailing agents.	Affiliated Committee  Affiliated Committee  Type Join Ty	STATE A	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the composition of Bank, Depository, etc.	Affiliated Committee  Affiliated Committee  Figure 1	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

TITLE OR POSITION  anks or Other Deposito afety deposit boxes or material depositors.  Bank, Porcht ame of Bank, Porcht and Address	ories: List all banks of aintains funds.	or other depositories in which	Telephone Number	ts funds, holds accounts, rents
anks or Other Depositoratety deposit boxes or material boxes are material boxes.	ories: List all banks of aintains funds.	or other depositories in which	Telephone Number	ts funds, holds accounts, rents
anks or Other Deposito afety deposit boxes or ma	ories: List all banks of aintains funds.	or other depositories in which	Telephone Number	ts funds, holds accounts, rents
anks or Other Deposito	ories: List all banks o		Telephone Number	ts funds, holds accounts, rents
			Telephone Number	to fundo, heldo eccentro servi-
TITLE OR POSITION	▼		1	
TITLE OR POSITION	▼	OII I	_	
		CITY A	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
		(phone number – optional)		
Connected	d Organization	Affiliated Committee	int Fundraising Represent	tative Leadership PAC Sp
Relationship:		CITY A	STATE A	ZIP CODE ▲
	RICHMOND		TX	77469
Mailing Address				
Mailing Address	1612 CRABB RIV	ER RD		
NEHLS VICTOR	_	ated Committee, Joint Fur	draising Representativ	e, or Leadership PAC Spons
4.			FEC ID number	C
J			FEC ID number	С
3.			FEC ID number	С
1			FEC ID number	C

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spons
TEAM RONNY			
Mailing Address	PO BOX 51522		
	AMARILLO	, , , , , , , TX	79159
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee X Joint y by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representation	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  organ Chase Bank, NA	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which aintains funds.  organ Chase Bank, NA	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisin</b>	3 · ······		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundre	aising Representative	e, or Leadership PAC Spons
TOTAT GOINZ/CEE	- I I I I I I I I I I I I I I I I I I I		
Mailing Address	12000 STARCREST DR		
-	STE 101		
	SAN ANTONIO	TX L	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected		Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
Connected esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify	d Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
resignated Agent: Identify Full Name Mailing Address	Affiliated Committee  y by name, address (phone number – optional)  CITY		
resignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail ame of Bank, epository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Te  ries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisin	g Participant:				
1.			FEC ID	number	С
2			FEC ID	number	C
3.			FEC ID	number	C
4.			,   FEC ID	number	C
			,		
Name of Any Connected	Organization, Affiliated	Committee, Joint Fu	ndraising Rep	resentativ	e, or Leadership PAC Spons
SHEDD VICTORY	' FUND				
Mailing Address	PO BOX 365				
	MCLEAN		, , , <u>l</u>	VA	22101
Relationship:		CITY A		STATE A	ZIP CODE ▲
Connected	I Organization Affiliat	ted Committee	oint Fundraising	Representa	ative Leadership PAC Sp
Designated Agent: Identify				Representa	ative Leadership PAC Sp
				Representa	ative Leadership PAC Sp
Designated Agent: Identify				Representa	Ative Leadership PAC Sp
Designated Agent: Identify Full Name				Representa	Leadership PAC Sp
Designated Agent: Identify Full Name				Representa	Leadership PAC Sp
Designated Agent: Identify Full Name	by name, address (phor			Representation of the second o	
Designated Agent: Identify  Full Name  Mailing Address	by name, address (phor	ne number – optional)		STATE A	
Pesignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposito safety deposit boxes or main	by name, address (phore the property of the pr	ne number – optional)	Telephone Nu	ETATE A	

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1. 2. 3. 4. 4. Alame of Any Connected O BICE VICTORY CO Mailing Address  Relationship:  Connected C	PO BOX 21315 OKLAHOMA CITY		FEC	C ID number	C C C C re, or Leadership PAC	Spon:
3. 4. Lame of Any Connected O BICE VICTORY CO	PO BOX 21315 OKLAHOMA CITY		FEC	C ID number	C	C Spons
4. BICE VICTORY CO	PO BOX 21315 OKLAHOMA CITY		FEC	C ID number	С	C Spons
lame of Any Connected O BICE VICTORY CO Mailing Address  Relationship:	PO BOX 21315 OKLAHOMA CITY					C Spons
BICE VICTORY CO	PO BOX 21315 OKLAHOMA CITY	ommittee, Joint F	Fundraising	Representativ	ve, or Leadership PAC	Spon:
BICE VICTORY CO	PO BOX 21315 OKLAHOMA CITY	ommittee, Joint F	Fundraising	Representativ	ve, or Leadership PAC	Spons
Relationship:	OKLAHOMA CITY					
Relationship:	OKLAHOMA CITY					
Relationship:	OKLAHOMA CITY					
						1 1 1
	C			OK	73156	
Connected C		ITY 🛦		STATE A	ZIP COE	DE 🛦
esignated Agent: Identify b	y name, address (phone		<u> </u>			<u> </u>
Mailing Address						
						l , ,
TITLE OR POSITION ▼	CIT	Y 🛦		STATE ▲	ZIP CODE	<b>A</b>
			Telephon	e Number		

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r	g Participant:				
1			FEC ID numb	per C	
2.			FEC ID numb	per C	
3.			FEC ID numb	per C	
4.			FEC ID numb	per C	
ame of Any Connected ISSA VICTORY F	Organization, Affiliated Co	mmittee, Joint Fund	draising Represent	ative, or Leadership PA	C Spon
133A VICTORTT					
Mailing Address	9070 IRVINE CENTER DR	RIVE			1 1
Mailing Address	SUITE 150				
	IRVINE		ı CA	A	
Dalationahin		<b>-</b>			- 📗
Relationship:	Cl	TY ▲	STAT	E ▲ ZIP CO	DE 🛦
	d Organization Affiliated  Affiliated  by by name, address (phone)		nt Fundraising Repre	sentative Leadership	PAC S
			nt Fundraising Repre	sentative Leadership	PAC S
esignated Agent: Identif			nt Fundraising Repre	sentative Leadership	PAC S
esignated Agent: Identif			nt Fundraising Repre	sentative Leadership	PAC S
esignated Agent: Identif			nt Fundraising Repre	sentative Leadership	
esignated Agent: Identif	y by name, address (phone	number – optional)	nt Fundraising Repre		-
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone	number – optional)			-
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone	number – optional)  Y	STATE Telephone Number	ZIP COD	- L
Full Name Mailing Address  TITLE OR POSITION	ries: List all banks or other	number – optional)  Y	STATE Telephone Number	ZIP COD	- L
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or management of Bank, Capito	y by name, address (phone  CITY  ries: List all banks or other aintains funds.	number – optional)  Y	STATE Telephone Number	ZIP COD	- L
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank, epository, etc.	y by name, address (phone  CITY  ries: List all banks or other aintains funds.	number – optional)  Y	STATE Telephone Number	ZIP COD	- L
Full Name Mailing Address  TITLE OR POSITION anks or Other Depositor defety deposit boxes or mail	ries: List all banks or other aintains funds.	number – optional)  Y	STATE Telephone Number	ZIP COD	- L
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank, epository, etc.	ries: List all banks or other aintains funds.	number – optional)  Y	STATE Telephone Number	ZIP COD	- L

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisin</b>	<b>5</b>		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spon
<u> </u>			
	ı 75 S HIGH ST		
Mailing Address			
	STE. 4		
	DUBLIN	OH	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
resignated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)  CITY		
Full Name   Mailing Address	compositories in which sintains funds.	STATE A	ZIP CODE A
Full Name	composition of the position of the state of	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisin</b> 1		FEC ID number	C
2.			
		FEC ID number	C
3.		FEC ID number	C
		FEC ID number	С
4.			
lame of Any Connected	Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spon
HOUSE MAJORI	「Y TRUST		
Mailing Address	228 S WASHINGTON STREET SUITE 115		
Mailing Address			
	ALEXANDRIA		2024.4
	<sub>I</sub> ALEXANDRIA	, , , , I VA I	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲ ative Leadership PAC Sp
Connected	CITY A		
esignated Agent: Identify  Full Name	CITY   d Organization  Affiliated Committee    X Jo		
Connected esignated Agent: Identify	CITY   d Organization  Affiliated Committee    X Jo		
esignated Agent: Identify  Full Name	CITY   d Organization  Affiliated Committee    X Jo		ative Leadership PAC Sp
esignated Agent: Identify  Full Name  Mailing Address	CITY A  d Organization Affiliated Committee   by pame, address (phone number – optional)	oint Fundraising Represent	ative Leadership PAC Sp
Connected Pesignated Agent: Identify	CITY A  d Organization Affiliated Committee   by pame, address (phone number – optional)	pint Fundraising Represent	ative Leadership PAC Sp

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisin</b>			
1.		FEC ID numbe	er C
2.	<u> </u>	FEC ID numbe	er C
3.		FEC ID numbe	er C
4.		   FEC ID numbe	er C
4.			
ame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representa	tive, or Leadership PAC Spons
WOMACK MAJOI	RITY FUND		
1			
Mailing Address	228 S WASHINGTON ST STE 115		<u> </u>
		\/\	22314
	<sub>I</sub> ALEXANDRIA	<sub>I</sub> VA	
Relationshin:			
	CITY A	STATE  Joint Fundraising Repres	
Connected	CITY ▲ d Organization Affiliated Committee	STATE  Joint Fundraising Repres	
Connected esignated Agent: Identify	CITY ▲ d Organization Affiliated Committee	STATE  Joint Fundraising Repres	
esignated Agent: Identify  Full Name	CITY ▲ d Organization Affiliated Committee	STATE  Joint Fundraising Repres	
esignated Agent: Identify  Full Name	CITY ▲ d Organization Affiliated Committee	STATE  Joint Fundraising Repres	
esignated Agent: Identify  Full Name  Mailing Address	CITY A  d Organization Affiliated Committee  y by name, address (phone number – option	STATE  Joint Fundraising Repres	entative Leadership PAC Sp
esignated Agent: Identify  Full Name	CITY A  d Organization Affiliated Committee  y by name, address (phone number – option	STATE  Joint Fundraising Repres  al)	entative Leadership PAC Sp

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 60 of 161

afety deposit boxes or ma	ries: List all banks o	or other depositories in whice	Telephone Number	ts funds, holds accounts, rents
anks or Other Deposito afety deposit boxes or ma	vries: List all banks of aintains funds.	or other depositories in whic		ts funds, holds accounts, rents
TITLE OR POSITION	<b>▼</b>		Telephone Number	
TITLE OR POSITION	▼			
		CITY A	STATE ▲	ZIP CODE ▲
Mailing Address				
Full Name				
		Affiliated Committee	int Fundraising Represent	ative Leadership PAC Sp
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
Deletionship	BETHESDA	0.774	MD MD	20824
	DETUESSA			20024
Mailing Address	PO BOX 30844			
ame of Any Connected	_	ated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
4			FEC ID number	C
			FEC ID number	C
3.			FEC ID number	C
				C

FEC Form 1S (Revised 02/2017)

Page 61 of 161

5(g) c	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected BRADY VICTORY	Organization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	8505 TECHNOLOGY FOREST PLACE		
		SUITE 702		
		THE WOODLANDS	TX	77381
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	undraising Represent	ative Leadership PAC Sponsor
8.		/ by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Telep	phone Number	
9.		ries: List all banks or other depositories in which the	e committee deposit	s funds, holds accounts, rents
		gton Bank		<u>, , , , , , , , , , , , , , , , , , , </u>
	Name of Bank, Huntin Depository, etc.			
	Name of Bank, Huntin	gton Bank		
	Name of Bank, Huntin Depository, etc.	gton Bank  1901 Breton Road SE		
	Name of Bank, Huntin Depository, etc.	gton Bank	MI STATE A	49506 ZIP CODE <b>A</b>

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). Joint Fundraisir		FEC ID number	C
1.		FEC ID number	С
2.		FEC ID number	C
3.			
4.		FEC ID number	C
lame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
TEAM MCHENRY	<b>(</b>		
Mailing Address	228 S. WASHINGTON STREET		
Ü	SUITE 115		
	ALEXANDRIA	VA VA	22314
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
Connected		Fundraising Representa	Leadership PAC Sp
Connecter connec	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Joint by by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mailing and the same of Bank, Atlanti	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which caintains funds.	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mailing and the same of Bank, Atlanti	Affiliated Committee  y by name, address (phone number – optional)  CITY  CITY  Teleprises: List all banks or other depositories in which caintains funds.  C Union Bank	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   Te  ries: List all banks or other depositories in which aintains funds.  C Union Bank  1800 Robert Fulton Drive	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundrais</b> i	ig Farticipant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	C
7-			
=	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spons
NUNES VICTOR	<b>Y FUND</b> 		
	<sub> </sub> PO BOX 6545		
Mailing Address	10 30 80 80 80 80 80 80 80 80 80 80 80 80 80		
	VISALIA	CA L	93290
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ad Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	nt Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)	nt Fundraising Representa	
esignated Agent: Identif	fy by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or marks and marks are deposited as a second content of the content of th	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, repository, etc.	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A
esignated Agent: Identification of Early depository, etc.	cories: List all banks or other depositories in which aintains funds.	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b> r	T.	FFC ID	C
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundra	aising Representative	e, or Leadership PAC Spor
NRSC/NRCC VIC	CTORY COMMITTEE		
Mailing Address	228 S WASHINGTON STREET #115		
	ALEXANDRIA	, VA I	22314
Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif			Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY		
Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Te  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank, Classi	y by name, address (phone number – optional)  CITY   Te  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mane of Bank, Classi	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which a aintains funds.	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.  C City Bank	STATE A	ZIP CODE A
Full Name	y by name, address (phone number – optional)  CITY   CITY   Te  pries: List all banks or other depositories in which aintains funds.  C City Bank	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

2	Organization, Affiliated Committee, Joint Fundr	FEC ID number FEC ID number FEC ID number	C
4. Lame of Any Connected		FEC ID number	
		aising Representativ	
			e, or Leadership PAC Spons
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Organization Affiliated Committee		ative Leadership PAC Sp
	by name, address (phone number - optional)		
Full Name			
Full Name			
Full Name	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)	STATE A	

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page <u>66</u> **of** <u>161</u>

h). <b>Joint Fundraisi</b>	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
STIVERS VICTO	RY COMMITTEE		
Mailing Address	228 S WASHINGTON ST STE 115		
	ALEXANDRIA	, ,   VA	22314
Relationship:	CITY 🛦	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee Join  y by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION   anks or Other Depositor	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposited deposit boxes or market deposit boxes or market deposit boxes.	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION   anks or Other Depositor	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b> ç	g Participant:		
	1		FEC ID number	C
	2.		FEC ID number	C
	3		FEC ID number	C
	4		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundra	nising Representativ	re, or Leadership PAC Sponsor
	Mailing Address	228 S WASHINGTON STREET STE 115		
		ALEXANDRIA	VA	22314
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Represent	tative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		Tel	ephone Number	
9.	safety deposit boxes or ma	ies: List all banks or other depositories in which t ntains funds.	he committee deposi	ts funds, holds accounts, rents
	Depository, etc.			
	Mailing Address			
ı		CITY ▲	STATE ▲	ZIP CODE ▲

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	ing Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected SCALISE LEAD!	d Organization, Affiliated Committee, Joint Fundi ERSHIP FUND	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 9891		
	ARLINGTON	VA	22219
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
esignated Agent: Ident	ed Organization Affiliated Committee January Joint	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident			Leadership TAC S
			Leadership TAC S
Full Name			Leadership TAC S
Full Name			Leadership TAC S
Full Name	ify by name, address (phone number – optional)	STATE A	ZIP CODE A
Full Name	ify by name, address (phone number – optional)  CITY		
Full Name Mailing Address  TITLE OR POSITION	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or necessity.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g) d	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected  MCCAUL VICTOF	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	PO BOX 341027		
		AUSTIN	TX	78734
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	y by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE A
	TITLE OR POSITION	•		ZIP CODE <b>A</b>
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank,	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	
9.	Banks or Other Depositor safety deposit boxes or ma	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	
9.	Banks or Other Depositor safety deposit boxes or man Name of Bank,	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	
9.	Banks or Other Depositor safety deposit boxes or many Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the	STATE ▲ ephone Number	

FEC Form 1S (Revised 02/2017)

WRIGHT VICTORY FUND  Mailing Address  75 S HIGH ST  STE. 4  DUBLIN  CITY ▲ STATE ▲ ZIP  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leader  Pall Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲ STATE ▲ ZIP OF Telephone Number  TITLE OR POSITION ▼  Telephone Number  Title Or Depositories: List all banks or other depositories in which the committee deposits funds, holds acterly deposit boxes or maintains funds.  Telephone Number	n). <b>Joint Fundraisi</b> i	ng Participant:		
3.	1		FEC ID number	С
A. FEC ID number C  4. FEC ID number C  4. FEC ID number C  FEC ID number	2.		FEC ID number	С
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership WRIGHT VICTORY FUND  Mailing Address  75 S HIGH ST  STE. 4  DUBLIN  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leader  Leader  Leader  Leader  Besignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  Title OR POSITION ▼  CITY ▲  STATE ▲  ZIP C  Telephone Number			FEC ID number	C
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership WRIGHT VICTORY FUND  Mailing Address  75 S HIGH ST  STE. 4  DUBLIN  Relationship:  CITY A  STATE A  ZIP  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leader  Leader  Leader  Leader  Leader  STATE A  ZIP  Connected Organization  Affiliated Committee  Title OR POSITION  CITY A  STATE A  ZIP  CITY A  STATE A  ZIP  Telephone Number  Title OR POSITION  Telephone Number  Title OR Positionies: List all banks or other depositories in which the committee deposits funds, holds acterly deposit boxes or maintains funds.  STATE A  ZIP CITY A  STATE			FEC ID number	C
WRIGHT VICTORY FUND  Mailing Address  75 S HIGH ST  STE. 4  DUBLIN  Connected Organization  Affiliated Committee  ✓ Joint Fundraising Representative  Leader  Leader  Leader  Leader  Pull Name  Mailing Address  TITLE OR POSITION ✓  CITY ▲  STATE ▲  ZIP  Telephone Number	7.		J	
Mailing Address    75 S HIGH ST		_	ndraising Representative	e, or Leadership PAC Spor
Relationship:  CITY ▲ STATE ▲ ZIP  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leader  Leader  Pull Name  Mailing Address  CITY ▲ STATE ▲ ZIP  CITY ▲ STATE ▲ ZIP  Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP O  Telephone Number  Title OR Positiories: List all banks or other depositories in which the committee deposits funds, holds actively deposit boxes or maintains funds.  Table Depositories: List all banks or other depositories in which the committee deposits funds, holds actively deposit boxes or maintains funds.	WRIGHT VICTOR	RY FUND		
Relationship:  CITY ▲ STATE ▲ ZIP  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leader  Leader  Pull Name  Mailing Address  CITY ▲ STATE ▲ ZIP  CITY ▲ STATE ▲ ZIP  Title OR POSITION ▼ CITY ▲ STATE ▲ ZIP O  Telephone Number  Title OR Positiories: List all banks or other depositories in which the committee deposits funds, holds actively deposit boxes or maintains funds.  Table Depositories: List all banks or other depositories in which the committee deposits funds, holds actively deposit boxes or maintains funds.				
STE. 4  DUBLIN  Connected Organization  Affiliated Committee   Joint Fundraising Representative  Leader  Leader  Leader  Leader  Pull Name  Mailing Address  CITY ▲  STATE ▲  ZIP  CITY ▲  STATE ▲  ZIP  Title OR POSITION ▼  Telephone Number  Title Or Positories: List all banks or other depositories in which the committee deposits funds, holds acted the depository, etc.	Martine Address	<sub> </sub> 75 S HIGH ST		
Relationship:  CITY ▲ STATE ▲ ZIP  Connected Organization Affiliated Committee  Joint Fundraising Representative Leader  Leader  Parallel Name  Mailing Address  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CITY → STATE ▲ ZIP CITY → STATE → ZIP CITY	Mailing Address	. STE 4		
Relationship:  CITY ▲  STATE ▲  ZIP  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leader  Leader  Leader  Leader  Leader  Leader  Leader  State ▲  State A  State A  State A  ZIP C  Title OR POSITION ▼  CITY A  STATE A  ZIP C  Telephone Number  Telephone Number  Leader  Telephone Number  Leader  Title OR POSITION ▼  Telephone Number  Leader  Lea				
Connected Organization		DUBLIN 	OH	43017
Pesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  Telephone Number	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Mailing Address  Mailing Address  CITY ▲ STATE ▲ ZIP C  Telephone Number  Telephone Number  Telephone Number  anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds ac fety deposit boxes or maintains funds.				
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP O  Telephone Number  Telephone Number  anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds active deposit boxes or maintains funds.  ame of Bank, epository, etc.				ative Leadership PAC S
TITLE OR POSITION   CITY   Telephone Number	esignated Agent: Identif			ative Leadership PAC S
TITLE OR POSITION   CITY   Telephone Number	esignated Agent: Identif			Leadership PAC S
Telephone Number	esignated Agent: Identif			Leadership PAC S
anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds active deposit boxes or maintains funds.  ame of Bank, epository, etc.	esignated Agent: Identif	fy by name, address (phone number – optional)		
ame of Bank, epository, etc.	esignated Agent: Identification Full Name  Mailing Address	fy by name, address (phone number – optional)		
	esignated Agent: Identif  Full Name    Mailing Address	fy by name, address (phone number – optional)	STATE A	
Mailing Address	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	C
2.			C
3.		FEC ID number	C
4.		FEC ID number	C
lame of Any Connecte	d Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
TEAM BOEBER	T JOINT FUNDRAISING COMMITTE	<u> </u>	
Mailing Address	PO BOX 752		
ag / taa. ooo			
	RIFLE	CO	81652
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
	Affiliated Committee	Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident		Fundraising Representa	Leadership PAC Sp
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)		
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Anks or Other Deposite afety deposit boxes or necessity.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITIO	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Anks or Other Deposite afety deposit boxes or mane of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Tanks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Tanks or Other Deposit afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
FALLON VICTOR	RY FUND		
Mailing Address	PO BOX 3653		
	DUBLIN	OH	43016
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Sp
	Affiliated Committee X Joint fy by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines 5(

5(g) o	r(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	С
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
		P.O. BOX 6545		
	Mailing Address	F.O. BOX 0040		
		VISALIA	CA CA	93290
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
8.				_
0.	Designated Agent: Identify	by name, address (phone number - optional)		
0.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
0.		by name, address (phone number – optional)		
O.	Full Name	by name, address (phone number – optional)		
0.	Full Name	by name, address (phone number – optional)		
0.	Full Name	CITY	STATE A	ZIP CODE A
O.	Full Name	CITY A	STATE A	
9.	Full Name Mailing Address  TITLE OR POSITION	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE A
-	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor of Banks or Mame of Bank, Depository, etc.	CITY A  Tele  ries: List all banks or other depositories in which the	ephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(g) or (h). <b>Joint Fundraising</b>	g Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundra	aising Representativ	e, or Leadership PAC Sponsor
BETH VICTORY F	·UND 		
Mailing Address	PO BOX 630167		
	IRVING	TX	75063
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee	Fundraising Represent	ative Leadership PAC Sponso
. <b>Designated Agent:</b> Identify  Full Name	by name, address (phone number – optional)		
Mailing Address			
	I		
TITLE OR POSITION	CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITION	▼ CITY ▲		
	CITY   Tel  ies: List all banks or other depositories in which t	STATE A	ZIP CODE A
Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY   Tel  ies: List all banks or other depositories in which t	STATE A	ZIP CODE A
Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY   Tel  ies: List all banks or other depositories in which t	STATE A	ZIP CODE A
Banks or Other Depositor safety deposit boxes or main Name of Bank, Depository, etc.	CITY   Tel  ies: List all banks or other depositories in which t	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
VICTORY 2022			
	22780 INDIAN CREEK DRIVE, STE 100		
Mailing Address			
	DULLES	VA	20166
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	Leadership PAC Sp
	Affiliated Committee Join Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identing Full Name     Mailing Address	fy by name, address (phone number – optional)  CITY   T	STATE A	ZIP CODE A
esignated Agent: Identing Full Name     Mailing Address	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for Lines

(g) or (h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
Name of Any Connected	d Organization, Affiliated Committee, Joint Fundrai	sing Representativ	e, or Leadership PAC Sponsor
Mailing Address	824 S MILLEDGE AVE		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE ▲
	Affiliated Committee Solution Joint F	undraising Represent	ative Leadership PAC Sponso
Full Name			
Mailing Address			
TITLE OR POSITION	N ▼ CITY ▲	STATE ▲	ZIP CODE ▲
		ephone Number	
	ories: List all banks or other depositories in which th	no committoo donosit	. f de le le e e e e e e e e e e e e e e e
Name of Bank, Depository, etc.		le committee deposit	s runds, noids accounts, rents
Name of Bank,			s runds, noids accounts, rents
Name of Bank, Depository, etc.			s runds, noids accounts, rents

FEC Form 1S (Revised 02/2017)

(g) or (h). <b>Joint Fundraisi</b> i	ng Participant:		
1		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	С
Name of Any Connected	l Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	2470 DANIELLS BRIDGE ROAD SUITE 121		
	ATHENS	GA	30606
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Designated Agent: Identif	fy by name, address (phone number – optional)		
Mailing Address			
TITLE OR POSITION	N ▼ CITY ▲	STATE ▲	ZIP CODE ▲
	Tele	phone Number	
		priorie Number	
Banks or Other Deposite safety deposit boxes or m  Name of Bank, Depository, etc.	pries: List all banks or other depositories in which th		s funds, holds accounts, rents
Name of Bank, Depository, etc.	pries: List all banks or other depositories in which th		s funds, holds accounts, rents
safety deposit boxes or m	pries: List all banks or other depositories in which th		s funds, holds accounts, rents

FEC Form 1S (Revised 02/2017)

5(g) c	or(h). <b>Joint Fundraisin</b> ç	g Participant:			
	1		FEC	ID number	C
	2		FEC	ID number	C
	3.		FEC	ID number	C
	4		FEC	ID number	C
6.		Organization, Affiliated Committee, Joint FuR - FUTURE 1ST COMMITTEE	ındraising R	epresentative	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 2381			
		OTTAWA		L L	61350
	Relationship:	CITY ▲		STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Joint Fundraisi	ng Representa	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional	)		
	Full Name				
	Mailing Address				
	TITLE OR POSITION	▼ CITY ▲		STATE ▲	ZIP CODE ▲
			Telephone	Number	
9.	Banks or Other Depositor safety deposit boxes or ma  Name of Bank, Depository, etc.	ies: List all banks or other depositories in whintains funds.	ich the comr	nittee deposit	s funds, holds accounts, rents
	Mailing Address				
	Mailing Address				
		CITY ▲		STATE ▲	ZIP CODE ▲

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

or(h). <b>Joint Fundr</b>	aising Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	cted Organization, Affiliated Committee, J	oint Fundraising Representati	ve, or Leadership PAC Sponsor
EMMER VICT	ORY COMMITTEE		
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE 4	ZIP CODE A
Conn	ected Organization Affiliated Committee	X Joint Fundraising Represer	tative Leadership PAC Sponso
Full Name	entify by name, address (phone number – c		
			1
	CITY ▲	STATE A	ZIP CODE ▲
TITLE OR POSIT	TION ▼ CITY ▲	STATE A	ZIP CODE A
TITLE OR POSIT	TION ▼ CITY ▲	STATE ▲ Telephone Number	ZIP CODE A
Banks or Other Deposafety deposit boxes of Name of Bank,	ositories: List all banks or other depositories	Telephone Number	
Banks or Other Deposafety deposit boxes of Name of Bank, Depository, etc.	ositories: List all banks or other depositories maintains funds.	Telephone Number	
Banks or Other Deposafety deposit boxes of Name of Bank,	ositories: List all banks or other depositories maintains funds.	Telephone Number	
Banks or Other Deposafety deposit boxes of Name of Bank, Depository, etc.	ositories: List all banks or other depositories maintains funds.	Telephone Number	
Banks or Other Deposafety deposit boxes of Name of Bank, Depository, etc.	ositories: List all banks or other depositories maintains funds.	Telephone Number	

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected MULLIN VICTOR	Organization, Affiliated Committee, Joint Fundrai	ising Representativ	e, or Leadership PAC Sponsor
	Mailing Address	332 W. LEE HIGHWAY		
		WARRENTON	, VA	20186
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected		Fundraising Represent	
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			ephone Number	-   -
			phione reamber	
9.	Name of Bank,	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	safety deposit boxes or ma	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank,	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the		s funds, holds accounts, rents
9.	Name of Bank, Depository, etc.	ries: List all banks or other depositories in which the		s funds, holds accounts, rents

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1	Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
SMITH VICTORY			
Mailing Address	824 S. MILLEDGE AVENUE		
mailing / ladicee	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE ▲
	by name, address (phone number – optional)		
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)		
Full Name	by name, address (phone number – optional)		
Full Name			
Full Name	CITY A	STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor dafety deposit boxes or main arms of Bank,	CITY   CITY   Te	elephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or main arms of Bank, epository, etc.	CITY   CITY   Te	elephone Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

or 9 Page <u>82</u> of <u>161</u>

n). Joint Fundraising	r ai tioipairt.			
1.			FEC ID number	C
2.			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	C
=	rganization, Affiliated Commi	tee, Joint Fundra	ising Representative	e, or Leadership PAC Spor
TEAM MCCAUL V	CTORY COMMITTEE			
Mailing Address	228 S. WASHINGTON STREET			
	SUITE 115			
	ALEXANDRIA		VA VA	22314
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Com	mittee X Joint I	Fundraising Representa	ative Leadership PAC S
	Organization Affiliated Composition		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify	_		Fundraising Represent	Leadership PAC S
esignated Agent: Identify  Full Name	_		Fundraising Represent	Leadership PAC S
esignated Agent: Identify  Full Name	_	per – optional)		Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone numb	per – optional)		
esignated Agent: Identify  Full Name	by name, address (phone numb	per – optional)		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	oy name, address (phone numb	per – optional)	STATE A ephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositoring deposition boxes or main arme of Bank, epository, etc.	oy name, address (phone numb	per – optional)	STATE A ephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	oy name, address (phone numb	per – optional)	STATE A ephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositoring deposition boxes or main arme of Bank, epository, etc.	oy name, address (phone numb	per – optional)	STATE A ephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
•	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
WALBERG VICT	ORY FUND		
Mailing Address	PO BOX 1362		
	JACKSON	MI	49204
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Join Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r	ig Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Funda	raising Representative	e, or Leadership PAC Spon
BOST VICTORY	FUND		
	824 S. MILLEDGE AVENUE		
Mailing Address			
	SUITE 101		
	ATHENS	GA L	30605
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee X Joint by by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION   anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank,	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

SUITE 115  ALEXANDRIA  CITY A  STATE A  ZIP CODE A  connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Specific Specifi	SUITE 115  ALEXANDRIA  VA  22314  Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Specific Segments of the segment of the se		▼ CITY ▲	STAT		
SUITE 115  ALEXANDRIA  CITY A  STATE A  ZIP CODE A  connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Specific Specifi	Mailing Address  228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Special Representative  Leadership PAC Special Representative  Affiliated Committee  Leadership PAC Special Representative				. 1 1	1_1
SUITE 115  ALEXANDRIA  CITY A  STATE A  ZIP CODE A  connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sp  Identify by name, address (phone number – optional)	Mailing Address  228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  Relationship:  CITY A  STATE A  ZIP CODE A  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sp  resignated Agent: Identify by name, address (phone number – optional)	Mailing Address				
SUITE 115  ALEXANDRIA  CITY   STATE   ZIP CODE   connected Organization  Affiliated Committee  X Joint Fundraising Representative  Leadership PAC Sp	Mailing Address  228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Sp	Full Name				
SS 228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  CITY  STATE  ZIP CODE  ZIP CODE	Mailing Address  228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  Relationship:  CITY  STATE  ZIP CODE  ZIP CODE				presentative L. I	Leadership PAC Sp
228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  VA 22314	Mailing Address  228 S. WASHINGTON STREET  SUITE 115  ALEXANDRIA  VA  22314					
228 S. WASHINGTON STREET	KATKO VICTORY FUND  Mailing Address  228 S. WASHINGTON STREET		ALEXANDRIA		VA 22314	
. 228 S. WASHINGTON STREET	KATKO VICTORY FUND	Mailing Address				
			. 228 S WASHINGTON STREET			
	ame of Any Connected Organization. Affiliated Committee Joint Fundraising Representative or Leadership PA	KATKO VICTORY	228 S. WASHINGTON STREET			
FEC ID number		3.		FEC ID nu	mber C	
FEC ID number	EEC ID number			, ,   FEC ID nu	mber C	

FEC Form 1S (Revised 02/2017)

) or (h).	Joint Fundraisin	g Participant:				
1.				FEC	D ID number	С
2. [				FEC	D ID number	C
3. [				FEC	D ID number	C
4.				FEC	D ID number	C
	-	_		nt Fundraising	Representativ	e, or Leadership PAC Sponsor
ZEL	_DIN VICTOR`	Y COMMINIT	TEE 2020 			
M	lailing Address	47 FLINTLO	OCK DRIVE			
		SHIRLEY			NY	11967
R	lelationship:		CITY A		J L STATE ▲	ZIP CODE ▲
		d Organization	Affiliated Committee	y Joint Fundra		
Designa	ated Agent: Identify	/ by name, add	dress (phone number – op	tional)		
Full	Name					
	Name					
Mai	iling Address		CITY A		STATE A	ZIP CODE A
Mai						
Banks safety of Deposite	iling Address	ries: List all ba	CITY A	Telephone	STATE ▲ e Number	
Banks safety of Deposite	or Other Depositodeposit boxes or material boxes or material boxes.	ries: List all ba	CITY A	Telephone	STATE ▲ e Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

ganization, Affiliated Committee, Jo	FEC FEC	D number  D number  D number  Peresentative	C C C , or Leadership PAC Spon
ganization, Affiliated Committee, Jo	FEC FEC	D number	C
ganization, Affiliated Committee, Jo	FEC	D number	С
ganization, Affiliated Committee, Jo			
P.O. Box 2485	pint Fundraising Re	epresentative	, or Leadership PAC Spon
P.O. Box 2485	oint Fundraising Re	epresentative	, or Leadership PAC Spon
P.O. Box 2485			
Springfield			
Springfield			
<u> </u>		VA	22152
CITY ▲		STATE ▲	ZIP CODE ▲
name, address (phone number – o	ptional)		
		1 1	
CITY A		STATE A	ZIP CODE ▲
J			0022 _
	Telephone	Number	
- -	Affiliated Committee  y name, address (phone number – o	Affiliated Committee  y Joint Fundraising  y name, address (phone number – optional)  CITY   Telephone I	Affiliated Committee   Joint Fundraising Representation  name, address (phone number – optional)  CITY   STATE   Telephone Number  State deposits all banks or other depositories in which the committee deposits

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	С
6.	Name of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	ROUZER CONGR	RESSIONAL TRUST		
	Mailing Address	P.O. Box 701		
		Clayton	NC NC	27528
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
8.	Full Name	CITY A	STATE A	
<ol> <li>8.</li> <li>9.</li> </ol>	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	CITY A  Te	STATE A	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositors safety deposit boxes or mail	CITY A  Te	STATE A	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor	CITY A  ries: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or main Name of Bank,	CITY A  ries: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A  ries: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY A  ries: List all banks or other depositories in which intains funds.	STATE A elephone Number the committee deposits	ZIP CODE A

FEC Form 1S (Revised 02/2017)

5(g)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.	- 	FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	С
	4.		FEC ID number	C
6.		Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	RODNEY DAVIS	VICTORY FUND		
		. D.O. Pou 0904		
	Mailing Address	P.O. Box 9891		
		Arlington	VA	22219
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint	Fundraising Representa	tive Leadership PAC Sponsor
_				
8.	Designated Agent: Identify	by name, address (phone number - optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY A	STATE A	ZIP CODE A
8.	Full Name	CITY A		
8.	Full Name	CITY A	STATE A	
9.	Full Name   _   _   _    Mailing Address  TITLE OR POSITION	CITY   CITY   Te	STATE   STATE   Ilephone Number	ZIP CODE A
	Full Name	CITY   CITY   Te  ries: List all banks or other depositories in which intains funds.	STATE   STATE   Ilephone Number	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail. Name of Bank,	CITY   CITY   Te  ries: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   CITY   Te  ries: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   CITY   Te  ries: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_161\_\_

TITLE OR POSITION	<b>▼</b>	CITY A	STATE ▲	ZIP CODE A
				ZIP CODE ▲
Mailing Address				
Full Name				
	d Organization Affiliate y by name, address (phon		nt Fundraising Represent	ative Leadership PAC S
Relationship:		CITY ▲	STATE A	
	KANSAS CITY		MO	64108
Mailing Address	2345 GRAND BLVD SU	JITE 2400		
ame of Any Connected		Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
4.			red ib number	C
3.			FEC ID number	C
2.			FEC ID number	C
I			FEC ID number	C

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	s or other depositories in whi	ch the committee dep	posits funds, holds accounts, rents
		Tolophone Number	
<b>▼</b>	1	Telephone Number	
	CITY A		
			1 1 , , , , 1-1 , ,
	<u> </u>		<u> </u>
by name, addre	ss (phone number – optional)		
d Organization	Affiliated Committee X J	oint Fundraising Repres	sentative Leadership PAC Sp
_	CITY A	STATE	ZIP CODE A
ATHENS		GA	30605
SUITE 101			
	JGE AVENUE		
2010 2001	205 AVENUE		
	ffiliated Committee, Joint Fu	ndraising Represent	ative, or Leadership PAC Spons
		1 20 15 1141115	
		EEC ID numb	er C
	824 S. MILLEI SUITE 101 ATHENS d Organization	824 S. MILLEDGE AVENUE  SUITE 101  ATHENS  CITY   d Organization  Affiliated Committee  X Journal  CITY   CITY   CITY   CITY   Ties: List all banks or other depositories in white	824 S. MILLEDGE AVENUE  SUITE 101  ATHENS  GA  CITY  STATE  Organization  Affiliated Committee  V Joint Fundraising Repres  Organization  CITY  STATE  Telephone Number  ries: List all banks or other depositories in which the committee dep

FEC Form 1S (Revised 02/2017)

or(h). <b>Joint Fundraisi</b>	ng Participant:			
1		FEC	D number	С
2.		FEC	D number	С
3.		FEC	D number	С
4		FEC	D number	С
= = = = = = = = = = = = = = = = = = =	Organization, Affiliated Committee	, Joint Fundraising	Representativ	e, or Leadership PAC Sponso
BRAD WENSTRO	UP VICTORY FUND			
Mailing Address	PO BOX 30844			
	BETHESDA		ı MDı	20824
Delete odete				
Relationship:	CITY A		STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	ee X Joint Fundrai	sing Represent	ative Leadership PAC Spo
Pull Name	fy by name, address (phone number	– optional)		
Mailing Address				
Mailing Address				
Mailing Address				
Mailing Address  TITLE OR POSITION	CITY ▲		STATE A	ZIP CODE A
	CITY A	Telephone	STATE A	ZIP CODE A
	CITY ▲	Telephone	STATE A	ZIP CODE A
TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m	ories: List all banks or other deposito		STATE ▲  Proper STATE ■	
TITLE OR POSITION	ories: List all banks or other deposito		STATE ▲  Proper STATE ■	
TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m  Name of Bank,	ories: List all banks or other deposito		STATE ▲  Proper STATE ■	
TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m  Name of Bank, Depository, etc.	ories: List all banks or other deposito		STATE ▲  Proper STATE ■	
TITLE OR POSITION  Banks or Other Deposite safety deposit boxes or m  Name of Bank, Depository, etc.	ories: List all banks or other deposito		STATE ▲  Proper STATE ■	

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

	1				
Mailing Address					
ame of Bank, epository, etc.					
anks or Other Depositor afety deposit boxes or mai	ies: List all bank intains funds.	s or other depositories in	which the commi	ttee deposit	s funds, holds accounts, rent
			relephone N		
TITLE OR POSITION	<b>▼</b>		Telephone N	umber	-   -
TITLE OR POSITION		CITY ▲		STATE A	ZIP CODE ▲
			, , , , I	,	1 , , , , 1-1 , ,
Mailing Address		<u>                                     </u>			<u> </u>
esignated Agent: Identify  Full Name	by name, addre	ss (phone number – optic	onal)		
	Organization		Joint Fundraisin	g Representa	ative Leadership PAC Sp
Relationship:		CITY ▲	-	STATE ▲	ZIP CODE ▲
Dalais et	ATHENS			GA	30605
	SUITE 101				
Mailing Address					
	824 S. MILLEI	OGE AVENUE			
ame of Any Connected (	Organization, Af	ffiliated Committee, Joint	Fundraising Re	oresentative	e, or Leadership PAC Spons
4.			. 20 "		~
3.				O number	C
				O number	C
1.				number	
2.			FEC II	O number	C

FEC Form 1S (Revised 02/2017)

1 2 3 4				. I FFC		$\sim$	
3					D number	C	
4.				FEC	D number	С	
				FEC	D number	С	
Name of				FEC	D number	С	
Name of							
			ed Committee, Join	Fundraising Re	presentative	e, or Leaders	hip PAC Sponso
ANDY	BARR VICTO	ORY COMMIT					
Mail	ing Address	332 W LEE HWY					
Wall	ing Address	#303					
		WARRENTON			, VA	20186	
Dolo	ationship:	WithElffor	OITY				
neia	Connected (		CITY ▲ filiated Committee	✗ Joint Fundraisi	STATE ▲		ZIP CODE ▲
Full Na	ame	<u> </u>					
	5						
				1	1 1	ı	
			CITY A		STATE A	711	
TITLE	E OR POSITION ▼	,	CITY A	Telephone	STATE A	ZII	P CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

(h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fu	ndraising Representativ	ve, or Leadership PAC Spon
WILSON LEADE	RSHIP FUND		
I			
	DO DOMATO		
Mailing Address	PO BOX 2456		
	SPRINGFIELD	VA V	22152
Relationship:	CITY ▲	STATE A	ZIP CODE A
Connect	ed Organization Affiliated Committee	oint Fundraising Represen	tative Leadership PAC Sp
	ed Organization Affiliated Committee X July July July July July July July July		tative Leadership PAC Sp
esignated Agent: Identi			tative Leadership PAC Sp
esignated Agent: Identi			tative Leadership PAC Sp
esignated Agent: Identi			
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi	ify by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)		
esignated Agent: Identification of the serious part of the serious	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite aftery deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whi	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_161\_\_

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
	Organization, Affiliated Committee, Joint Fun	ndraising Representativ	e, or Leadership PAC Spon
TEAM GALLAGE	iER 		
Marilia v. Aalalus sa	1915 SOUTH WEBSTER AVE		
Mailing Address	STE D		
	GREEN BAY	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	54301
5.1		WI	
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
Connecte		oint Fundraising Represent	ative Leadership PAC Sp
Connecte	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	d Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identif	Affiliated Committee   y Jo  y by name, address (phone number – optional)	oint Fundraising Represent	
esignated Agent: Identification  Full Name Mailing Address	Affiliated Committee   y Jo  y by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION Anks or Other Deposite afety deposit boxes or mame of Bank,	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Connecte  esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc.	Affiliated Committee  y Jo  y by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

ILLEDGE AVE, STE 101  CITY   address (phone number – co	Dint Fundraisin	FEC ID number FEC ID number FEC ID number  Representation  GA  STATE Andraising Represe	ive, or Leadership PAC Spon
on, Affiliated Committee, J D ILLEDGE AVE, STE 101  CITY  A on Affiliated Committee  address (phone number – c	point Fundraisin	FEC ID number  FEC ID number  IN THE STATE A	ive, or Leadership PAC Spon  30605  ZIP CODE   ZIP CODE
on, Affiliated Committee, J D ILLEDGE AVE, STE 101  CITY  A on Affiliated Committee  address (phone number – c	point Fundraisin	rec ID number  ng Representati	ive, or Leadership PAC Spon  30605  ZIP CODE
on, Affiliated Committee, J D ILLEDGE AVE, STE 101  CITY  A on Affiliated Committee  address (phone number – c	Joint Fundraisin	ng Representati	ive, or Leadership PAC Spon
ILLEDGE AVE, STE 101  CITY   address (phone number – co	✗ Joint Fun	GA STATE A	30605
ILLEDGE AVE, STE 101  CITY   address (phone number – co	✗ Joint Fun	GA STATE A	30605
ILLEDGE AVE, STE 101  CITY   an Affiliated Committee  address (phone number – c		STATE A	ZIP CODE A
CITY A  on Affiliated Committee  address (phone number – c		STATE A	ZIP CODE A
CITY A  on Affiliated Committee  address (phone number – c		STATE A	ZIP CODE A
CITY A  on Affiliated Committee  address (phone number – c		STATE A	ZIP CODE A
CITY   and Affiliated Committee  address (phone number – c		STATE A	ZIP CODE A
CITY   and Affiliated Committee  address (phone number – c		STATE A	ZIP CODE A
address (phone number – c			
address (phone number – d		ndraising Represe	
	1 1 1 1	1 1 1 1 1 1	
		. 1 1	
CITY A		STATE ▲	ZIP CODE ▲
I			
	Telepr	none Number [	
	banks or other depositories.	banks or other depositories in which the	Telephone Number banks or other depositories in which the committee depo

FEC Form 1S (Revised 02/2017)

5(g) (	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	С
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected WALORSKI VICTO	Organization, Affiliated Committee, Joint Fundrais	sing Representativ	e, or Leadership PAC Sponsor
	Mailing Address	P.O. BOX 26141		
		ALEXANDRIA	VA	22313
	Relationship:	CITY A	STATE A	ZIP CODE ▲
	Connected	d Organization Affiliated Committee	undraising Represent	ative Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number – optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
			phone Number	
9.			a accomittan danasi	
	Banks or Other Depositor safety deposit boxes or ma Name of Bank,	ries: List all banks or other depositories in which th aintains funds.	e committee deposi	is funds, holds accounts, rents
	safety deposit boxes or ma			s funds, holds accounts, rents
	safety deposit boxes or ma		e committee deposi	s funds, holds accounts, rents
	Name of Bank, Depository, etc.		e committee deposit	s funds, holds accounts, rents
	Name of Bank, Depository, etc.		e committee deposition	s funds, holds accounts, rents

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>		FEC ID number	С
1.		FEC ID number	C
2.			C
3.		FEC ID number	
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e. or Leadership PAC Spon
PALMER VICTO			.,
Mailing Address	1919 OXMOOR ROAD		
	#223		
	HOMEWOOD	ı ALı	35209
Relationship:	CITY A	STATE A	ZIP CODE A
	Affiliated Committee Joint Joint by by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identing Full Name     Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identing Full Name     Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or marketed and marketed and marketed and marketed afety deposit boxes or marketed afety deposit boxes or marketed afety deposit boxes or marketed and marke	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   To  pries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). <b>Joint Fundraising</b>		1	- O ID :	
1.			EC ID number	C
2.		FE	EC ID number	C
3		FE	EC ID number	C
4.		FE	EC ID number	C
ame of Any Connected (	Organization, Affiliated Committee, J	oint Fundraisinç	g Representativ	e, or Leadership PAC Spor
REED VICTORY (	COMMITTEE			
Mailing Address	824 S. MILLEDGE AVENUE			
	SUITE 101			
	ATHENS	1 1 1 1 1 1	GA	30605
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
	Organization Affiliated Committee	X Joint Funds	raising Representa	ative Leadership PAC S
Connected			raising Represent	ative Leadership PAC S
Connected esignated Agent: Identify	Organization Affiliated Committee		raising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee		raising Represent	ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee	optional)		ative Leadership PAC S
Connected esignated Agent: Identify Full Name	Organization Affiliated Committee  by name, address (phone number – o	optional)		
Connected esignated Agent: Identify Full Name Mailing Address	Organization Affiliated Committee  by name, address (phone number – o	optional)		
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	Organization Affiliated Committee  by name, address (phone number – of the committee)  CITY   es: List all banks or other depositorie	optional)  Telepho	STATE A	ZIP CODE A
connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail	Organization Affiliated Committee  by name, address (phone number – of the committee)  CITY   es: List all banks or other depositorie	optional)  Telepho	STATE A	ZIP CODE A
connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	Organization Affiliated Committee  by name, address (phone number – of the committee)  CITY   es: List all banks or other depositorie	optional)  Telepho	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017) for I

h). <b>Joint Fundraisin</b>	g Participant:		
1.	<u> </u>	FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ELISE VICTORY	Organization, Affiliated Committee, Joint Fund	Iraising Representativ	e, or Leadership PAC Spons
Mailing Address	P.O. BOX 500		
	GLENS FALLS	NY NY	12801
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	nt Fundraising Represent	tative Leadership PAC Sp
Connected		nt Fundraising Represent	tative Leadership PAC Sp
Connected esignated Agent: Identify	d Organization Affiliated Committee	nt Fundraising Represent	tative Leadership PAC Sp
esignated Agent: Identify  Full Name	d Organization Affiliated Committee	nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identify  Full Name	d Organization Affiliated Committee		Leadership PAC Sp
esignated Agent: Identify  Full Name	Affiliated Committee   Join  y by name, address (phone number – optional)		
esignated Agent: Identify  Full Name  Mailing Address	Affiliated Committee		
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	Affiliated Committee	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fur	ndraising Representati	ve, or Leadership PAC Spon
TEAM ESTES			
	DO DOV 20144		
Mailing Address	P.O. BOX 26141		
	ALEXANDRIA	VA VA	22313
Relationship:	CITY ▲	STATE 4	ZIP CODE ▲
		oint Fundraising Represer	tative Leadership PAC Sp
	Affiliated Committee		tative Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif			Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)		
esignated Agent: Identii  Full Name    Mailing Address	fy by name, address (phone number – optional)		Leadership PAC Sp
esignated Agent: Identif	fy by name, address (phone number – optional)		
esignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management are of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
•	Organization, Affiliated Committee, Joint Fundra DY BARR COMMITTEE	aising Representative	e, or Leadership PAC Spon
Mailing Address	332 W. LEE HIGHWAY		
-	#303		
	WARRENTON	VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		Fundraising Representa	Leadership PAC S
	y by name, address (phone number – optional)	Fundraising Represente	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif		Fundraising Representation	Leadership PAC S
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions.	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng raiticipant.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
MAST VICTORY	COMMITTEE		
	204 CAMULEDOE AVE STE 404		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Join fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and ma	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint	Fundraising Representativ	e, or Leadership PAC Spons
MIKE ROGERS V	'ICTORY		
	0500 WW 00N DOLW 5VADD		
Mailing Address	2523 WILSON BOULEVARD		
	<b>#4</b> 		
		1/4	22201
	ARLINGTON	VA	
	CITY ▲ d Organization Affiliated Committee	STATE ▲  Joint Fundraising Represent	ZIP CODE ▲ ative Leadership PAC Sp
Connected	CITY A	STATE ▲  Joint Fundraising Represent	
Connected esignated Agent: Identify	CITY ▲ d Organization Affiliated Committee	STATE ▲  Joint Fundraising Represent	
esignated Agent: Identify Full Name	CITY ▲ d Organization Affiliated Committee	STATE ▲  Joint Fundraising Represent	
esignated Agent: Identify  Full Name	CITY A d Organization Affiliated Committee	STATE ▲  Joint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	CITY A  d Organization Affiliated Committee  y by name, address (phone number – option	STATE A  Joint Fundraising Represent  al)	ative Leadership PAC Sp
esignated Agent: Identify  Full Name	CITY A  d Organization Affiliated Committee  y by name, address (phone number – option	STATE ▲  Joint Fundraising Represent	ative Leadership PAC Sp

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 106 of 161

1.		FEC ID number	
ALLEN VICTORY FUND  Mailing Address  PO BOX 420  ATLANTA  Relationship:  Connected Organization  esignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION   inks or Other Depositories: List all bate fety deposit boxes or maintains funds.  ame of Bank, epository, etc.			
ALLEN VICTORY FUND  Mailing Address  PO BOX 420  ATLANTA  Relationship:  Connected Organization  esignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION   Interest of Bank, epository, etc.		FEC ID number	C
ALLEN VICTORY FUND  Mailing Address  PO BOX 420  ATLANTA  Relationship:  Connected Organization  esignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION   Title Or Positories: List all bate fety deposit boxes or maintains funds.  The prository, etc.		FEC ID number	C
ALLEN VICTORY FUND  Mailing Address  PO BOX 420  ATLANTA  Relationship:  Connected Organization  esignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION   Inks or Other Depositories: List all base fety deposit boxes or maintains funds.  Inches of Bank, espository, etc.		FEC ID number	C
Mailing Address  PO BOX 420  ATLANTA  Relationship:  Connected Organization  esignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION   inks or Other Depositories: List all bate fety deposit boxes or maintains funds.  ame of Bank, epository, etc.	Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spons
Mailing Address  ATLANTA  ATLANTA  Relationship:  Connected Organization  esignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION ▼  Inks or Other Depositories: List all bate fety deposit boxes or maintains funds.  Inches of Bank, epository, etc.			
Mailing Address  ATLANTA  ATLANTA  Relationship:  Connected Organization  esignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION ▼  Inks or Other Depositories: List all bate fety deposit boxes or maintains funds.  Inches of Bank, epository, etc.			
Relationship:  Connected Organization  esignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION   Inks or Other Depositories: List all bate fety deposit boxes or maintains funds.  Inches of Bank, epository, etc.	)521 		
Relationship:  Connected Organization  esignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION   Inks or Other Depositories: List all bate fety deposit boxes or maintains funds.  Inches of Bank, epository, etc.			
Connected Organization  resignated Agent: Identify by name, add  Full Name  Mailing Address  TITLE OR POSITION  TITLE OR POSITION  Inks or Other Depositories: List all bate fety deposit boxes or maintains funds.  The prository, etc.		GA GA	30342
Full Name  Mailing Address  TITLE OR POSITION   Inks or Other Depositories: List all base fety deposit boxes or maintains funds.  The pository, etc.	CITY A	STATE ▲	ZIP CODE ▲
TITLE OR POSITION ▼  Inks or Other Depositories: List all bate fety deposit boxes or maintains funds.  In the property of the positories of the property of t	ress (phone number – optional)		
anks or Other Depositories: List all ba fety deposit boxes or maintains funds.  The property of Bank, expository, etc.			
anks or Other Depositories: List all ba fety deposit boxes or maintains funds.  The property of Bank, expository, etc.			
anks or Other Depositories: List all ba fety deposit boxes or maintains funds.  The property of Bank, expository, etc.		1 1 . 1	1
anks or Other Depositories: List all ba fety deposit boxes or maintains funds.  The property of Bank, expository, etc.	CITY A	STATE ▲	ZIP CODE ▲
fety deposit boxes or maintains funds.  ame of Bank,  pository, etc.	I	elephone Number	
1	nks or other depositories in which	the committee deposits	s funds, holds accounts, rent

FEC Form 1S (Revised 02/2017)

5(g) or (h). <b>Joint Fundraising I</b>	Participant:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
6. Name of Any Connected Or BUDD VICTORY	ganization, Affiliated Committee, Joint Fundrais	sing Representative	e, or Leadership PAC Sponsor
Mailing Address	PO BOX 97275		
	RALEIGH	NC NC	27624
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected O	rganization Affiliated Committee X Joint Fu	undraising Representa	ative Leadership PAC Sponsor
8. <b>Designated Agent:</b> Identify by	y name, address (phone number – optional)		
8. <b>Designated Agent:</b> Identify by	y name, address (phone number – optional)		
	y name, address (phone number – optional)		
Full Name	y name, address (phone number – optional)		
Full Name	y name, address (phone number – optional)		
Full Name		STATE A	ZIP CODE A
Full Name	CITY A	STATE A	
Full Name	CITY   Telepositories in which the	phone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

n). <b>Joint Fundraisin</b> o	Participant:				
1.				C ID number	C
2.			FE	C ID number	С
3.			FE	C ID number	С
4.			FE0	C ID number	C
		Committee, Joint	Fundraising	Representativ	e, or Leadership PAC Spor
FERGUSON VICT	ORY FUND				
Mailing Address	P.O. BOX 420304				
	ATLANTA			_ GA	30342
Relationship:		CITY A		STATE ▲	ZIP CODE ▲
				ising Represent	tative Leadership PAC S
Connected esignated Agent: Identify Full Name				aising Represent	Leadership PAC S
esignated Agent: Identify				ising Represent	Leadership PAC S
esignated Agent: Identify  Full Name				ising Represent	Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (pho		nal)		Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	by name, address (pho	one number – option	nal)		
esignated Agent: Identify  Full Name	by name, address (pho	one number – option	nal)		
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail	by name, address (pho	one number – option	Telephon	STATE A e Number	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	by name, address (pho	one number – option	Telephon	STATE A e Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Anks or Other Depositor fety deposit boxes or mail	by name, address (pho	one number – option	Telephon	STATE A e Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor fety deposit boxes or mail ame of Bank, epository, etc.	by name, address (pho	one number – option	Telephon	STATE A e Number	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundraisin</b>		550	ID number	
1.				
2.			ID number	C
3.		FEC	ID number	C
4		FEC	ID number	C
	Organization, Affiliated Committee,	Joint Fundraising F	Representativ	e, or Leadership PAC Spon
Davidson Victory	Fund 			
Mailing Address	499 S. Capitol Street SW			
	Suite 407			
	Washington		DC	20003
Relationship:	CITY ▲		STATE A	ZIP CODE ▲
Connected	Affiliated Committee  by name, address (phone number –	_	sing Represent	Leadership PAC S
Connected	Affiliated Committee		sing Represent	Leadership PAC S
Connected esignated Agent: Identify	Affiliated Committee		sing Represent	Leadership PAC S
Connected esignated Agent: Identify Full Name	Affiliated Committee		sing Represent	Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	Affiliated Committee  by name, address (phone number –	optional)		
Connected esignated Agent: Identify Full Name	Affiliated Committee  by name, address (phone number –	optional)	STATE A	
esignated Agent: Identify  Full Name  Mailing Address	Affiliated Committee  by name, address (phone number –	optional)	STATE A	
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail ame of Bank,	Affiliated Committee  by name, address (phone number –  CITY   CITY   ries: List all banks or other depositor	- optional)  Telephone	STATE A Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or marketed agents.	Affiliated Committee  by name, address (phone number –  CITY   CITY   ries: List all banks or other depositor	- optional)  Telephone	STATE A Number	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or mail ame of Bank,	Affiliated Committee  by name, address (phone number –  CITY   CITY   ries: List all banks or other depositor	- optional)  Telephone	STATE A Number	ZIP CODE A
connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito  afety deposit boxes or material depository, etc.	Affiliated Committee  by name, address (phone number –  CITY   CITY   ries: List all banks or other depositor	- optional)  Telephone	STATE A Number	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 110 of 161

h). <b>Joint Fundraising</b>	•		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
lame of Any Connected (	Organization, Affiliated Committee, Joint Fundr	raising Panyacantative	o ar Landovskin DAC Snon
Smucker Victory C		aising nepresentative	e, or Leadership FAC Spon
Mailing Address	824 S. MILLEDGE AVENUE		
	SUITE 101		
	ATHENS	GA	30605
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC Sp
	Organization Affiliated Committee Joint  by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify  Full Name		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identify  Full Name		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify  Full Name  Mailing Address	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional)  CITY   CITY   Tellies: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional)  CITY   CITY   Tellies: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	by name, address (phone number – optional)  CITY   CITY   Tellies: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or main ame of Bank, epository, etc.	by name, address (phone number – optional)  CITY   CITY   Tellies: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 111 of 161

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
CRAMER VICTO	ORY FUND		
I			
Mailing Address	PO BOX 26141		
	ALEXANDRIA	VA VA	22313
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connect			
	Affiliated Committee X Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		it rundraising nepresenta	Leadership FAC S
esignated Agent: Identi		It rundraising nepresent	Leadership FAC S
esignated Agent: Identi		it runtialsing nepresenta	Leadership FAC 5
esignated Agent: Identi	fy by name, address (phone number – optional)	it runtialsing nepresenta	Leadership FAC 5
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 112 of 161

1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	C
ame of Any Connected Chris Stewart Free	Organization, Affiliated Committee, Joint F Edom Fund	undraising Representativ	e, or Leadership PAC Spon
Mailing Address	610 S. BOULEVARD		
3			
	ТАМРА	, , , ,     FL	33606
Relationship:	CITY A	STATE <b>A</b>	ZIP CODE ▲
esignated Agent: Identify	by name, address (phone number – optiona	al)	
Mailing Address	T		
Mailing Address			
Mailing Address			
Mailing Address			
	CITY A	STATE A	ZIP CODE A
TITLE OR POSITION	CITY A	STATE   Telephone Number	ZIP CODE A
TITLE OR POSITION	<u> </u>	Telephone Number	
TITLE OR POSITION	ries: List all banks or other depositories in w	Telephone Number	
TITLE OR POSITION  anks or Other Depositor afety deposit boxes or main arms of Bank,	ries: List all banks or other depositories in w	Telephone Number	
TITLE OR POSITION  anks or Other Depositor afety deposit boxes or main arms of Bank,	ries: List all banks or other depositories in w	Telephone Number	
anks or Other Depositor afety deposit boxes or main arms of Bank, epository, etc.	ries: List all banks or other depositories in w	Telephone Number	

FEC Form 1S (Revised 02/2017)

Page 113 of 161

h). Joint Fundraisi		FEC ID number	С
1		FEC ID number	С
2.		FEC ID number	C
3.		FEC ID number	C
4.		rec id fluifibei	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
Protect the Hous	<b>e</b>		
Martin Address	P.O. Box 30844		
Mailing Address			
	Bethesda	, MD	20824
Deletienebie			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee Joint Joint fy by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or markets.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 114 of 161

h). <b>Joint Fundraisin</b>	у Рагистрапи:		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	Iraising Representative	e, or Leadership PAC Spon
TEAM DUNCAN			
Mailing Address	228 S. WASHINGTON STREET		
Mailing Address	SUITE 115		
	ALEXANDRIA	ı VA ı	22314
Relationship:			
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected	d Organization Affiliated Committee	nt Fundraising Representa	ative Leadership PAC S
Connected		nt Fundraising Represent	ative Leadership PAC S
Connected esignated Agent: Identify	d Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	d Organization Affiliated Committee	nt Fundraising Representa	Leadership PAC S
Connected esignated Agent: Identify Full Name	Affiliated Committee Join  by name, address (phone number – optional)	st Fundraising Representation	
esignated Agent: Identify  Full Name  Mailing Address	Affiliated Committee Join  by name, address (phone number – optional)  CITY		
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito aftety deposit boxes or ma	Affiliated Committee  Affiliated Committee  Affiliated Committee  Affiliated Committee  CITY  CITY  Tries: List all banks or other depositories in which	STATE A	ZIP CODE A
connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito  affety deposit boxes or mail  ame of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Affiliated Committee  Affiliated Committee  CITY  CITY  Tries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma	Affiliated Committee  Affiliated Committee  Affiliated Committee  Affiliated Committee  CITY  CITY  Tries: List all banks or other depositories in which	STATE A	ZIP CODE A
connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito  affety deposit boxes or mail  ame of Bank, epository, etc.	Affiliated Committee  Affiliated Committee  Affiliated Committee  Affiliated Committee  CITY  CITY  Tries: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 115 of 161

	nks or other depositories in whether the state of the sta	Telephone Number	its funds, holds accounts, rent
ositories: List all bar or maintains funds.	nks or other depositories in wl		sits funds, holds accounts, rent
ositories: List all ba	nks or other depositories in whether the state of the sta		its funds, holds accounts, rent
ositories: List all ba	nks or other depositories in wh		its funds, holds accounts, rent
		Telephone Number	
TION V			1 1 1
TION V	CITY A	SIAIE	ZIP CODE ▲
			7ID 00DE :
lentify by name, add	ress (phone number – optiona	)	
nected Organization	Affiliated Committee x	Joint Fundraising Represer	tative Leadership PAC Sp
	CITY A	STATE 4	ZIP CODE ▲
ALEXANDR	IA	VA VA	22313
P.O. BOX 26	3141		
		undraising Representati	ve, or Leadership PAC Spons
		FEC ID Hullibel	<u> </u>
		J	
		J	C
		J	
		J	C
r	P.O. BOX 26  ALEXANDR  Alexandration  dentify by name, add	ected Organization, Affiliated Committee, Joint Function of Polymer CTORY COMMITTEE  P.O. BOX 26141  ALEXANDRIA  CITY   nected Organization  Affiliated Committee  Affiliated Committee  Affiliated Committee	FEC ID number

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 116 of 161

1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	С
of A Oto-d	Ourselinstine Affiliated Committee Laint Franch	sisina Danas satetia	a an Landauskin BAO Coan
-	Organization, Affiliated Committee, Joint Fundr ORY COMMITTEE	aising Representative	e, or Leadership PAC Spon
Mailing Address	228 S. WASHINGTON STREET		
	SUITE 115		
	ALEXANDRIA	, , VA ,	22314
Relationship:	CITY A	STATE A	ZIP CODE ▲
Connected	Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC S
	Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify  Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 117 of 161

h). <b>Joint Fundraisi</b> n			, ,   FE	EC ID number	
			FE	EC ID number	C
2.				EC ID number	-1 - 1 - 1 - 1 - 1
3.					
4.			Ft	EC ID number	C
ame of Any Connected	Organization, Affil	iated Committee, Jo	int Fundraising	g Representati	ve, or Leadership PAC Spor
BALDERSON VIC	CTORY COMM	MITTEE			
	P.O. BOX 26141				
Mailing Address					
	ALEXANDRIA			VA	22313
Relationship:		CITY ▲		STATE 4	ZIP CODE ▲
Connected	d Organization	Affiliated Committee	<b>X</b> Joint Fund	raising Represer	tative Leadership PAC S
		'		raising Represer	tative Leadership PAC S
		'		raising Represer	tative Leadership PAC S
esignated Agent: Identify		'		raising Represer	Leadership PAC S
esignated Agent: Identif		'		raising Represer	Leadership PAC S
esignated Agent: Identif	by name, address	'	otional)	raising Represer	Leadership PAC S
esignated Agent: Identif	by name, address	s (phone number – op	otional)	raising Represer	
esignated Agent: Identify Full Name Mailing Address	by name, address	s (phone number – op	otional)		
esignated Agent: Identify  Full Name	by name, address	c (phone number – op	otional)	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name	v by name, address	c (phone number – op	otional)	STATE A	
Full Name	v by name, address	c (phone number – op	otional)	STATE A	ZIP CODE A
Full Name	v by name, address	c (phone number – op	otional)	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc	v by name, address	c (phone number – op	otional)	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 118 of 161

TITLE OR POSITION  Banks or Other Depositor Safety deposit boxes or many Name of Bank, Depository, etc.  Mailing Address	pries: List all banks o		STATE A Telephone Number	ZIP CODE   S funds, holds accounts, rents
Banks or Other Depositors of Bank, Depository, etc.	pries: List all banks o		Telephone Number	
Banks or Other Depositors of Bank, Depository, etc.	ories: List all banks o		Telephone Number	
Banks or Other Deposito safety deposit boxes or ma	ories: List all banks o		Telephone Number	
Banks or Other Deposito	ories: List all banks o		Telephone Number	
			Telephone Number	
TITLE OR POSITION	<b>▼</b>	1	1	ZIP CODE ▲
TITLE OR POSITION	<b>▼</b>	CITY A	STATE ▲	ZIP CODE ▲
	1			
Mailing Address				
Full Name				
Designated Agent: Identif	y by name, address	(phone number – optional)		
Connecte	d Organization	Affiliated Committee	int Fundraising Representa	ative Leadership PAC Spo
Relationship:		CITY A	STATE ▲	ZIP CODE ▲
	ALEXANDRIA		, , , ,   VA	22314
3	SUITE 115			
Mailing Address	228 S. WASHING	TON STREET		
Name of Any Connected ARRINGTON VIC			draising Representative	e, or Leadership PAC Spons
4.			FEC ID number	[C]
.			FEC ID number	C
3.			FEC ID number	C

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 119 of 161

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
-	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
GREG PENCE V	ICTORY		
	<sub> </sub> P.O. BOX 275		
Mailing Address	1.0. BOX 273		
	TAYLORSVILLE	IN IN	47280
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Represent	Leadership PAC Sp
	Affiliated Committee Join  fy by name, address (phone number – optional)	t Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mailing and the second se	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 120 **of** 161

5(g) o	r(h). <b>Joint Fundraisin</b> ç	g Participant:		
	1.		FEC ID number	C
	2			
	3.		FEC ID number	C
	4		FEC ID number	C
6.	=	Organization, Affiliated Committee, Joint Fundra	ising Representative	e, or Leadership PAC Sponsor
	Mailing Address	370 EAST SOUTH TEMPLE		
		SUITE 580 SALT LAKE CITY	, UT	84111
	Relationship:	CITY ▲	STATE A	ZIP CODE ▲
			Fundraising Representa	
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	TITLE OR POSITION	▼ CITY ▲	STATE ▲	ZIP CODE ▲
		1	ephone Number	
	safety deposit boxes or mai	<b>ies:</b> List all banks or other depositories in which the ntains funds.	ne committee deposit	s funds, holds accounts, rents
	Depository, etc.			
	Mailing Address			

FEC Form 1S (Revised 02/2017)

Page 121 of 161

5(g) or (h)	. Joint Fundraising	Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
	me of Any Connected (	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
L				
	Mailing Address	9460 TEGNER ROAD		
		HILMAR	CA	95324
	Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	ative Leadership PAC Sponsor
		by name, address (phone number - optional)		
	signated Agent: Identify  Full Name	by name, address (phone number – optional)		
		by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	by name, address (phone number – optional)		
	Full Name	CITY A	STATE A	ZIP CODE A
	Full Name	CITY A	STATE A	
9. <b>Bar</b> safe Nan	Full Name	CITY   CITY   Tele  ies: List all banks or other depositories in which th	phone Number	ZIP CODE 🛦
9. <b>Bar</b> safe Nan	Full Name  Mailing Address  TITLE OR POSITION  This or Other Depositorically deposit boxes or main me of Bank,	CITY   CITY   Tele  ies: List all banks or other depositories in which th	phone Number	ZIP CODE 🛦
9. <b>Bar</b> safe	Full Name  Mailing Address  TITLE OR POSITION  hks or Other Depositoriety deposit boxes or maine of Bank, pository, etc.	CITY   CITY   Tele  ies: List all banks or other depositories in which th	phone Number	ZIP CODE 🛦
9. <b>Bar</b> safe	Full Name  Mailing Address  TITLE OR POSITION  hks or Other Depositoriety deposit boxes or maine of Bank, pository, etc.	CITY   CITY   Tele  ies: List all banks or other depositories in which th	phone Number	ZIP CODE 🛦

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_

WALBERG WINNIN  Mailing Address	ganization, Affiliate		FEC FEC	ID number ID number ID number ID number	C C C e, or Leadership PAC Spon
3. 4. 4. Lame of Any Connected Org WALBERG WINNIN Mailing Address	ganization, Affiliate G UNDER TH	ed Committee, Joint	FEC FEC	ID number	C
4. Jame of Any Connected Org WALBERG WINNIN Mailing Address Relationship:	ganization, Affiliate G UNDER TH	ed Committee, Joint	FEC	ID number	C
lame of Any Connected Org WALBERG WINNIN  Mailing Address  Relationship:	ganization, Affiliate G UNDER TH	ed Committee, Joint			
lame of Any Connected Org WALBERG WINNIN  Mailing Address  Relationship:	G UNDER TH		Fundraising F	Representativ	re, or Leadership PAC Spon
WALBERG WINNIN  Mailing Address  Relationship:	G UNDER TH		t Fundraising F	Representativ	re, or Leadership PAC Spon
Mailing Address	2870 DOBIE ROAD	E OAKS			
Mailing Address					
Mailing Address					
Mailing Address					
Relationship:	MASON				
Relationship:	MASON				
				MI	48854
		CITY A		STATE A	ZIP CODE ▲
esignated Agent: Identify by	name, address (pl	hone number – optic	onal)		
Full Name					
Mailing Address					
L					
L					
TITLE OR POSITION ▼		CITY A		STATE ▲	ZIP CODE ▲
			Telephone	Number _	
anks or Other Depositories afety deposit boxes or mainta ame of Bank, epository, etc.		other depositories in	which the com	mittee deposi	ts funds, holds accounts, rent
Mailing Address					
L					
				1 1	1 1

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_

). Joint Fundraisi	ig Faiticipalit.		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
me of Any Connected	Organization, Affiliated Committee, Joint FuDRY FUND	ındraising Representativ	e, or Leadership PAC Spo
Mailing Address	332 W. LEE HIGHWAY		
	#303		20196
Dolotionobin	WARRENTON	VA	20186
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee	loint Fundraising Represent	ative Leadership PAC S
			ative Leadership PAC S
signated Agent: Identif			ative Leadership PAC S
signated Agent: Identif			ative Leadership PAC S
signated Agent: Identif			ative Leadership PAC S
signated Agent: Identif	y by name, address (phone number – optional		
signated Agent: Identif	y by name, address (phone number – optional		
Full Name   _   _   Mailing Address	y by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in who	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  Inks or Other Deposite fety deposit boxes or mane of Bank,	y by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in who	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  Inks or Other Deposite fety deposit boxes or mane of Bank, pository, etc.	y by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in who	STATE A Telephone Number	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  Inks or Other Deposite fety deposit boxes or mane of Bank, pository, etc.	y by name, address (phone number – optional  CITY   CITY   Ories: List all banks or other depositories in who	STATE A Telephone Number	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_\_

1				
2.			FEC ID number	С
			FEC ID number	C
3.			FEC ID number	C
4.			FEC ID number	С
lame of Any Connected	Organization, Affiliated	Committee, Joint Fund	raising Representati	ve, or Leadership PAC Spons
MILLER VICTOR	Y FUND			
Mailing Address	228 S. WASHINGTON	STREET		
	SUITE 115			
	ALEXANDRIA		, ,   VA	22314
Relationship:		CITY A	STATE 4	ZIP CODE ▲
esignated Agent: Identif	y by name, address (phor	ne number – optional)		
Mailing Address				
. J				
			OT!TE :	ZIP CODE ▲
	(			
TITLE OR POSITION	<b>▼</b>	CITY A	STATE ▲	ZIF CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 125 **of** 161

h). <b>Joint Fundraisi</b>	1	FEC ID number	С
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
WATKINS VICTO	DRY COMMITTEE		
Mailing Address	PO BOX 30844		
	BETHESDA	MD	20824
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		Fundraising Representa	ative Leadership PAC Sp
Connecte		Fundraising Represent	ative Leadership PAC Sp
Connecte esignated Agent: Identi Full Name	ed Organization Affiliated Committee	Fundraising Represent	Leadership PAC Sp
Connecte	ed Organization Affiliated Committee	Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi Full Name	ed Organization Affiliated Committee	Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi Full Name	Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)		
esignated Agent: Identi	Affiliated Committee  Affiliated Committee  Y Joint  To be a committee of the committee of	Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	Affiliated Committee  Affiliated Committee  Y Joint  Ty by name, address (phone number – optional)  CITY		
connected Esignated Agent: Identification of Sanks, Connected Esignated Agent: Identification of Sanks or Other Deposite Sanks	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	Affiliated Committee  Y Joint  To pries: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	.g		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
=	Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
DAN CRENSHAV	V VICTORY COMMITTEE		
	824 S MILLEDGE AVE STE 101		
Mailing Address			
	ATUSIO		20005
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	d Organization Affiliated Committee Joint  y by name, address (phone number – optional)	EFundraising Representa	Leadership PAC Sp
		: Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		: Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identification Full Name   Mailing Address  TITLE OR POSITION   anks or Other Depositor	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page \_\_\_\_ **of** \_\_\_\_\_

h). <b>Joint Fundraisi</b> r	1	FFC ID number	С
1.		FEC ID number	
2.		FEC ID number	C
3.		FEC ID number	C
4		FEC ID number	C
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
DUNN VICTORY	FUND		
Mailing Address	12176 CHANCERY STATION CIR		
	RESTON	VA VA	20190
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		nt Fundraising Representa	Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee Join  by by name, address (phone number – optional)	nt Fundraising Representa	Leadership PAC S
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC S
esignated Agent: Identif		nt Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif  Full Name  Mailing Address	by by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposito	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_\_\_

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
ame of Any Connected GUEST MAJORI	l Organization, Affiliated Committee, Joint Fundi TY FUND	raising Representative	e, or Leadership PAC Spon
Mailing Address	120 N CONGRES ST STE 300		
	JACKSON	MS	39201
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	Affiliated Committee Joint Joint by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY	STATE A	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 129 of 161

n). <b>Joint Fundraising</b>						
1.				FEC ID number	С	
2				FEC ID number	C	
3.				FEC ID number	C	
4.				FEC ID number	C	
ame of Any Connected C	rganization, Affiliated	Committee, Join	t Fundraisi	ng Representati	ve, or Leadership	PAC Spon
TEAM CHENEY						
Mailing Address	3538 SOUTH WAKEFI	ELD ST.				
	ARLINGTON			VA	22206	
Relationship:		CITY A		STATE 4	ZIP (	CODE A
	Organization Affilia	ted Committee	<b>✗</b> Joint Fur	ndraising Represer	tative Leaders	
				ndraising Represer	tative Leaders	
Connected esignated Agent: Identify				ndraising Represer	tative Leaders	
Connected  esignated Agent: Identify  Full Name				ndraising Represer	tative Leaders	ship PAC S
Connected  esignated Agent: Identify  Full Name		ne number – optic	onal)		tative Leaders	ship PAC S
Connected  esignated Agent: Identify  Full Name	by name, address (pho	ne number – optic	onal)			ship PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address (pho	ne number – optic	onal)			ship PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address	by name, address (pho	ne number – optic	onal)	STATE A	ZIP CO	Ship PAC S
Esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Tanks or Other Depositoric	by name, address (pho	ne number – optic	onal)	STATE A	ZIP CO	Ship PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositorinately deposit boxes or main  ame of Bank,	by name, address (pho	ne number – optic	onal)	STATE A	ZIP CO	Ship PAC S
Connected  esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositoring the propository of the propository, etc.	by name, address (pho	ne number – optic	onal)	STATE A	ZIP CO	Ship PAC S

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_\_ **of** \_\_\_\_\_\_

0(9)	or(h). <b>Joint Fundraisin</b>	g Participant:		
	1.		FEC ID number	С
	2.		FEC ID number	C
	3.		FEC ID number	C
	4		FEC ID number	C
6.	Name of Any Connected GREG STEUBE V	Organization, Affiliated Committee, Joint Fundrai	sing Representative	e, or Leadership PAC Sponsor
	Mailing Address	499 SOUTH CAPITOL STREET SW		
		#407 WASHINGTON	D0	20002
	Databasetta		DC	20003
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee X Joint F	undraising Representa	Leadership PAC Sponsor
8.	Designated Agent: Identify	by name, address (phone number - optional)		
	Full Name			
	Mailing Address			
	Mailing Address			
	Mailing Address			
		CITY A	STATE A	ZIP CODE A
	Mailing Address  TITLE OR POSITION	•		ZIP CODE A
9.	Banks or Other Depositor safety deposit boxes or ma	Tele  ies: List all banks or other depositories in which the	STATE ▲	
9.	Banks or Other Depositor safety deposit boxes or ma	Tele  ies: List all banks or other depositories in which the	STATE ▲	
9.	Banks or Other Depositor safety deposit boxes or ma	Tele  ies: List all banks or other depositories in which the	STATE ▲	
9.	Banks or Other Depositor safety deposit boxes or ma	Tele  ies: List all banks or other depositories in which the	STATE ▲	
9.	Banks or Other Depositor safety deposit boxes or ma	Tele  ies: List all banks or other depositories in which the	STATE ▲	

FEC Form 1S (Revised 02/2017) for

Page \_\_\_\_ **of** \_\_\_\_\_

h). <b>Joint Fundraisi</b>	ng Participant:				
1.			FEC I	D number	С
2.			FEC I	D number	С
3.			FEC I	D number	С
4.			FEC I	D number	C
		liated Committee, Joint	Fundraising Re	presentativ	re, or Leadership PAC Spon
LATTA VICTORY	′ FUND ⊥				
	ı 9856 ARCHER L	_ANE			
Mailing Address					
				011	40047
	DUBLIN			OH	43017
Relationship:		CITY A		STATE A	ZIP CODE ▲
	ed Organization		Joint Fundraisir	g Represent	tative Leadership PAC S
Connecte				g Represent	tative Leadership PAC S
Connecte		Affiliated Committee		g Represent	tative Leadership PAC S
esignated Agent: Identi		Affiliated Committee		g Represent	tative Leadership PAC S
esignated Agent: Identi	fy by name, address	Affiliated Committee	nal)	g Represent	tative Leadership PAC S
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address	Affiliated Committee	nal)		
esignated Agent: Identi	fy by name, address	Affiliated Committee  s (phone number – option	nal)	STATE A	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address	Affiliated Committee  s (phone number – option  CITY	Telephone N	STATE A	
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address	Affiliated Committee  s (phone number – option  CITY	Telephone N	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address	Affiliated Committee  s (phone number – option  CITY	Telephone N	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address	Affiliated Committee  s (phone number – option  CITY	Telephone N	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_

h). <b>Joint Fundraisi</b>	1	FEC ID number	С
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
GONZALEZ VICT	ORY FUND		
Mailing Address	9856 ARCHER LANE		
	DUBLIN	OH	43017
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	d Organization Affiliated Committee Joint Joint y by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif		Fundraising Representa	Leadership PAC S
esignated Agent: Identif	y by name, address (phone number – optional)		
esignated Agent: Identif	y by name, address (phone number – optional)	Fundraising Representation	Leadership PAC S
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_\_ **of** \_\_\_\_\_\_

FEC ID number  SERVANT LEADERSHIP FUND  Mailing Address  824 S MILLEDGE AVE STE 101  ATHENS  ATHENS  Relationship:  C FEC ID number  C GA 30605  STATE A ZIP CODE A	h). Joint Fundraisi		FEC ID number	С
3.	1			
Athens  Relationship:  Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sposer Servant Leadership FUND  Mailing Address  824 S MILLEDGE AVE STE 101  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Servant Leadership PAC State    ZIP CODE    Leadership PAC Serial State    ZIP CODE    Affiliated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  Title OR POSITION    CITY    STATE    ZIP CODE    Telephone Number    Telephone Number				
ame of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Spo SERVANT LEADERSHIP FUND  Mailing Address  824 S MILLEDGE AVE STE 101  ATHENS  Relationship:  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC Septically State A ZIP CODE A  Estignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY A STATE A ZIP CODE A  Telephone Number	3.			
Mailing Address  824 S MILLEDGE AVE STE 101  ATHENS  Relationship:  CITY ▲ STATE ▲ ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundralsing Representative  Leadership PAC S  esignated Agent: Identify by name, address (phone number – optional)  Full Name  STATE ▲ ZIP CODE ▲  TITLE OR POSITION ▼ CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number  Telephone Number — optional)  anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, resterly deposit boxes or maintains funds.  ame of Bank, epository, etc.	4.		FEC ID number	C
Mailing Address    824 S MILLEDGE AVE STE 101	ame of Any Connected	d Organization, Affiliated Committee, Joint Fundi	raising Representative	e, or Leadership PAC Spon
ATHENS    Ca   30605	SERVANT LEAD	ERSHIP FUND		
ATHENS    Ca   30605				
Relationship:  CITY ▲  STATE ▲  ZIP CODE ▲  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC sesignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number	Mailing Address	824 S MILLEDGE AVE STE 101		
Relationship:  CITY A  STATE A  ZIP CODE A  Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC s  esignated Agent: Identify by name, address (phone number – optional)  Full Name  Mailing Address  TITLE OR POSITION   CITY A  STATE A  ZIP CODE A  Telephone Number  Telephone Number	Mailing Address			
Connected Organization		ATHENS	GA	30605
Connected Organization  Affiliated Committee  Joint Fundraising Representative  Leadership PAC sesignated Agent: Identify by name, address (phone number – optional)  Full Name	Relationship:	CITY A	STATE A	ZIP CODE A
Mailing Address  CITY ▲ STATE ▲ ZIP CODE ▲  Telephone Number	Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC S
TITLE OR POSITION ▼  CITY ▲  STATE ▲  ZIP CODE ▲  Telephone Number			t Fundraising Representa	Leadership PAC S
Telephone Number	esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
Telephone Number	esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
Telephone Number	esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
anks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, relatety deposit boxes or maintains funds.  ame of Bank, epository, etc.	esignated Agent: Identi		t Fundraising Representa	Leadership PAC S
afety deposit boxes or maintains funds.  ame of Bank, epository, etc.	esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
afety deposit boxes or maintains funds.  ame of Bank, epository, etc.	esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
epository, etc.	esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
Mailing Address	esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
	esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
1	esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
	esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_\_ **of** \_\_\_\_\_\_\_

h). <b>Joint Fundraisi</b> r	g Participant:		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
•	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
BUCKEYE VICTO	)RY FUND		
	<u> </u>		
Mailing Adalys	499 SOUTH CAPITOL STREET SW		
Mailing Address	407		
			20002
	WASHINGTON	DC DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
		t Fundraising Represent	ative Leadership PAC Sp
	d Organization Affiliated Committee Joint	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)	t Fundraising Represent	
esignated Agent: Identif	y by name, address (phone number – optional)  CITY		
esignated Agent: Identif  Full Name	y by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identif  Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or material depositions.	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or mail	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or material depositions, epository, etc.	y by name, address (phone number – optional)  CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page \_\_\_\_ **of** \_\_\_\_\_\_\_

5(g)	or(h). <b>Joint Fundraising</b>	g Participant:		
	1.		FEC ID number	C
	2.		FEC ID number	C
	3.		FEC ID number	C
	4.		FEC ID number	C
6.	Name of Any Connected (	Organization, Affiliated Committee, Joint Fundr	aising Representative	, or Leadership PAC Sponsor
	INDSTRUMO			
	Mailing Address	1515 BURNT BOAT DR NUM 112		
		BISMARCK	ND ND	58503
	Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Connected	Organization Affiliated Committee	Fundraising Representa	tive Leadership PAC Sponsor
8.		by name, address (phone number - optional)		
8.	Designated Agent: Identify  Full Name	by name, address (phone number – optional)		
8.		by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	by name, address (phone number – optional)		
8.	Full Name	CITY	STATE A	ZIP CODE A
8.	Full Name	CITY A		
9.	Full Name Mailing Address  TITLE OR POSITION	CITY A  Te  ies: List all banks or other depositories in which	STATE A	ZIP CODE A
	Full Name Mailing Address  TITLE OR POSITION Banks or Other Depositor	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A
	Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor safety deposit boxes or mail Name of Bank, Depository, etc.	CITY   CITY   Te  ies: List all banks or other depositories in which intains funds.	STATE A slephone Number the committee deposits	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_

1.			FEC ID	) number	C
2.			FEC ID	number	С
3.			FEC ID	number	С
4.			FEC ID	number	С
=	_	ed Committee, Joint F	undraising Rep	resentativ	ve, or Leadership PAC Spons
JOHN ROSE VIC	TORY FUND				
Mailing Address	PO BOX 2404				
				TN	38502
	COOKEVILLE				
	I Organization Af		Joint Fundraising	STATE A	
Connected	I Organization Af	filiated Committee			
Connected esignated Agent: Identify	I Organization Af	filiated Committee			
esignated Agent: Identify  Full Name	I Organization Af	filiated Committee			
esignated Agent: Identify  Full Name	d Organization Af	filiated Committee			Leadership PAC Sp
esignated Agent: Identify Full Name Mailing Address	d Organization Af	phone number – optiona	l)	g Represent	Leadership PAC Sp
esignated Agent: Identify  Full Name	d Organization Af	filiated Committee	l)	Represent	Leadership PAC Sp

FEC Form 1S (Revised 02/2017)

Page 137 of 161

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	l Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spon
HRW VICTORY	FUND 		
	224 C MILLEDGE AVE STE 404		
Mailing Address	824 S MILLEDGE AVE STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	Leadership PAC Sp
	Affiliated Committee  Join Join Market Join Market	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC S
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Ories: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

h). <b>Joint Fundrais</b> i	ng rantoipant.		
1		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4		FEC ID number	С
ame of Any Connected	d Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
TEAM TIMMONS	S 		
Mailing Address	228 S. WASHINGTON ST.		
Mailing Address	STE. 115		
	ALEXANDRIA	, VA	22314
Relationship:			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect		Fundraising Representa	ative Leadership PAC S
Connect	Affiliated Committee Joint Joint fy by name, address (phone number – optional)	Fundraising Representa	ative Leadership PAC S
Connecte con		Fundraising Representation	ative Leadership PAC S
Connecte con		Fundraising Representation	Leadership PAC S
Connecte con		Fundraising Representation	Leadership PAC S
Connecte con	fy by name, address (phone number – optional)	Fundraising Representation	
esignated Agent: Identification of the second of the secon	fy by name, address (phone number – optional)  CITY		
connecte con	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
connecte esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
connecte esignated Agent: Identification of Bank, Connecte esignated Agent: Identification of Connecte esignat	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A
connecte esignated Agent: Identification Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Te  ories: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 139 of 161

h). <b>Joint Fundraisi</b>	1	FEC ID number	C
1.			
2.		FEC ID number	C
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	l Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
WESTERMAN V			
<u> </u>			
	PO BOX 21097		
Mailing Address			
	HOT SPRINGS	AR	71903
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joint fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_\_ **of** \_\_\_\_\_\_

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representativ	e, or Leadership PAC Spon
TEAM HUDSON			
	204 CAMULEDOE AVE STE 404		
Mailing Address	824 S MILLEDGE AVE, STE 101		
	ATHENS	GA L	30605
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	nt Fundraising Represent	ative Leadership PAC Sp
	Affiliated Committee Join Join by by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		at Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	st Fundraising Represent	
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identing Full Name	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A

FEC Form 1S (Revised 02/2017)

Page 141 of 161

(h). <b>Joint Fundraisi</b> r	ig Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spons
Mailing Address	499 SOUTH CAPITOL STREET SW		
_	#405		
	WASHINGTON	DC	20003
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	d Organization	nt Fundraising Representa	ative Leadership PAC Spo
Designated Agent: Identif		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identif		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identif		nt Fundraising Representa	Leadership PAC Spo
Designated Agent: Identif		at Fundraising Representation	Leadership PAC Spo
Designated Agent: Identif	y by name, address (phone number – optional)	STATE A	Leadership PAC Spo
Designated Agent: Identif  Full Name  Mailing Address	y by name, address (phone number – optional)  CITY		
Designated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION	y by name, address (phone number – optional)  CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A
Pesignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Deposite Safety deposit boxes or make the period of Bank, Depository, etc.	y by name, address (phone number – optional)  CITY   Tories: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_

h). <b>Joint Fundraisi</b>	ng rantopanti		
1		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	draising Representative	e, or Leadership PAC Spons
VAN TAYLOR VI	CTORY FUND		
	1900 PRESTON ROAD		
Mailing Address			
	#267 - PMB 229		
	PLANO	TX	75093
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Join Join fy by name, address (phone number – optional)	nt Fundraising Represent	ative Leadership PAC Sp
		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		nt Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	nt Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mail to the control of the contr	fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Cries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Spon
Mailing Address	10809 GRASSY CREEK PL		
Mailing Address			
	RALEIGH	, NC	27614
D 1 11 11			
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
	Affiliated Committee  Join y J	t Fundraising Representa	ative Leadership PAC S
		t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	ative Leadership PAC S
esignated Agent: Identif	fy by name, address (phone number – optional)	st Fundraising Representation	Leadership PAC S
esignated Agent: Identif  Full Name    Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identification Full Name   _   _	fy by name, address (phone number – optional)  CITY   To	STATE A	ZIP CODE A
esignated Agent: Identification Full Name   _   _	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite affety deposit boxes or m  ame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   Topries: List all banks or other depositories in which	STATE A	ZIP CODE A

## Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page \_\_\_\_ **of** \_\_\_\_\_

(h). <b>Joint Fundraisi</b> r	ng Participant:		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
Name of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e, or Leadership PAC Sponso
Mailing Address	PO BOX 2485		
	SPRINGFIELD	VA VA	22152
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected		t Fundraising Representa	ative Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Spo
Connecter  Designated Agent: Identify	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee	t Fundraising Representa	Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee Join Join by by name, address (phone number – optional)		
Connected  Designated Agent: Identify  Full Name	d Organization Affiliated Committee Join Join by by name, address (phone number – optional)	t Fundraising Representa	Leadership PAC Spo
Connected  Designated Agent: Identify  Full Name  Mailing Address	Affiliated Committee  y by name, address (phone number – optional)  CITY		
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   To	STATE A	ZIP CODE A
Connected  Designated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  Banks or Other Depositor  afety deposit boxes or mailing and mailing address  Jame of Bank, Depository, etc.	Affiliated Committee  y by name, address (phone number – optional)  CITY   CITY   To	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or mail ame of Bank, epository, etc.  Mailing Address	▼ ries: List all banks	CITY A  or other depositories in wh	STATE Telephone Number		CODE A
anks or Other Depositor defety deposit boxes or material deposit boxes or material depository, etc.	▼ ries: List all banks	CITY A	STATE Telephone Number	ZIP C	CODE A
TITLE OR POSITION  anks or Other Depositoratety deposit boxes or material deposition of Bank,	▼ ries: List all banks	CITY A	STATE Telephone Number	ZIP C	CODE A
TITLE OR POSITION	▼ ries: List all banks	CITY A	STATE Telephone Number	ZIP C	CODE A
			STATE		
			STATE		
Mailing Address					
Mailing Address					
Mailing Address					
	1				
Full Name					
esignated Agent: Identify	y by name, address	(phone number – optional	)	_	
Connected	d Organization	Affiliated Committee	loint Fundraising Repre	sentative Leade	rship PAC Sp
Relationship:		CITY A	STAT		CODE A
	BETHESDA		ME	20824	_
-					
Mailing Address	PO BOX 30844				
TEAM GT					
ame of Any Connected	Organization, Affil	iated Committee, Joint Fu	ndraising Represent	ative, or Leadership	PAC Spons
4.			FEC ID numb	per C	
			FEC ID numb	per C	
3.			FEC ID numb	per C	
2					

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 146 of 161

(h). Joint Fundrais		FEC ID number	
1.		FEC ID number	C
2.		FEC ID number	C
3.			
4.		FEC ID number	C
lame of Any Connecte	d Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spons
	IUMPH COMMITTEE		
Mailing Address	3103 JULIAN GLEN CIR		<u> </u>
	WAXHAW	NC	28173
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connect	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident	ed Organization Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Ident	ify by name, address (phone number – optional)		
esignated Agent: Ident	ify by name, address (phone number – optional)	Tendraising Representation	Leadership PAC Sp
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)  CITY		
esignated Agent: Ident  Full Name  Mailing Address	ify by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  LITTING OR POSITION  anks or Other Deposit	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Lanks or Other Deposit afety deposit boxes or name and the control of the control	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident  Full Name  Mailing Address  TITLE OR POSITION  LITTING OR POSITION  anks or Other Deposit	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION Anks or Other Deposite afety deposit boxes or name of Bank,	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Ident Full Name Mailing Address  TITLE OR POSITION anks or Other Deposite afety deposit boxes or name of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page <u>147</u> **of** <u>161</u>

ories: List all banks or other deposi aintains funds.	tories in which the	committee deposit	s funds, holds accounts, rents
	Telep	hone Number	
CITY A		STATE ▲	ZIP CODE ▲
		.     .	1
y by name, address (phone numbe	r – optional)		
_		naraising Representa	Leadership PAC Spor
			ZIP CODE ▲
		WI	54016
PO BOX 183			
VIOTORY I OND			
=	ee, Joint Fundrais	ing Representative	e, or Leadership PAC Sponso
		TEO ID Hambol	
			C
			C
			C
	Organization, Affiliated Committee VICTORY FUND  PO BOX 183  HUDSON  CITY   d Organization  Affiliated Committee  y by name, address (phone number  CITY   CITY    CITY    CITY    The committee of the committee	Organization, Affiliated Committee, Joint Fundraisi VICTORY FUND  PO BOX 183  HUDSON  CITY   d Organization  Affiliated Committee  X Joint Fundraisi  Y by name, address (phone number – optional)  CITY   Telep  Pries: List all banks or other depositories in which the	FEC ID number  Organization, Affiliated Committee, Joint Fundraising Representative VICTORY FUND  PO BOX 183  HUDSON CITY A STATE A  d Organization Affiliated Committee  y by name, address (phone number – optional)  CITY A STATE A  Telephone Number

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

1.		FEC ID number	C
		FEC ID number	C
2.		FEC ID number	С
3.			
4.		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Fund	raising Representative	e. or Leadership PAC Spon
=	AM VICTORY FUND		
1			
Mailing Address	9070 IRVINE CENTER DRIVE		
	SUITE 150		
	IRVINE	CA	92618
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint	t Frankrisian Banzasatı	
	by name, address (phone number – optional)	t Fundraising Representa	tive Leadership PAC S
esignated Agent: Identify  Full Name		t Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identify		T Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identify  Full Name		T Fundraising Hepresenta	Leadership PAC S
esignated Agent: Identify  Full Name			Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optional)		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional)  CITY   CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional)  CITY   CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name	by name, address (phone number – optional)  CITY   CITY   Teles: List all banks or other depositories in which	STATE A	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 149 of 161

h). <b>Joint Fundraisi</b>	1	EEO ID	С
1.		FEC ID number	
2.		FEC ID number	С
3.		FEC ID number	C
4		FEC ID number	C
ame of Any Connected	Organization, Affiliated Committee, Joint Funds	raising Representative	e, or Leadership PAC Spon
FRANKLIN VICT	ORY FUND		
Mailing Address	P.O. BOX 2811		
	LAKELAND		33806
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	d Organization Affiliated Committee X Joint	t Fundraising Representa	ative Leadership PAC Sp
	d Organization Affiliated Committee X Joint by by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif		t Fundraising Representa	Leadership PAC S
esignated Agent: Identif		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identif	y by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identif	by by name, address (phone number – optional)  CITY		
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identification Full Name	y by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 150 of 161

n). <b>Joint Fundraising</b>	raiticipant.		_			
1.				FEC ID numb	- =	<del></del>
2.				FEC ID numb	er C	
3.				FEC ID numb	er C	
4.				FEC ID numb	er C	
ame of Any Connected C	organization, Affilia	ted Committee, J	loint Fundrai	sing Represent	ative, or	Leadership PAC Spor
UNITED TO WIN						
Mailing Address	PO BOX 9891					
	ARLINGTON			VA		22219
Relationship:		CITY A		STATI	<b>■</b>	ZIP CODE ▲
		ffiliated Committee		undraising Repre	sentative	Leadership PAC S
Connected  esignated Agent: Identify  Full Name				Fundraising Repre	sentative	Leadership PAC S
esignated Agent: Identify				Fundraising Repre	sentative	Leadership PAC S
esignated Agent: Identify  Full Name				Fundraising Repre	sentative	Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (		optional)			Leadership PAC S
esignated Agent: Identify  Full Name  Mailing Address	by name, address (	phone number – c	optional)			
esignated Agent: Identify  Full Name	by name, address (	phone number – c	optional)			
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	by name, address (	phone number – c	optional)	STATE ephone Number		ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main ame of Bank, epository, etc.	by name, address (	phone number – c	optional)	STATE ephone Number		ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main	by name, address (	phone number – c	optional)	STATE ephone Number		ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositori fety deposit boxes or main ame of Bank, epository, etc.	by name, address (	phone number – c	optional)	STATE ephone Number		ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spon
TEAM HILL			
	PO BOX 7244		
Mailing Address			
	LITTLE ROCK	AR AR	72217
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
		int Fundraising Represent	Leadership PAC Sp
	Affiliated Committee Jofy by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   pries: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>		FEC ID number	С
1.		FEC ID number	C
2.			
3.		FEC ID number	C
4.		FEC ID number	C
ame of Any Connected	d Organization, Affiliated Committee, Joint Fundr	raising Renresentativ	e or Leadershin PAC Snon
GARBARINO VI		along Hoprocontaits	s, or Leadership 1 Ac open
Mailing Address	PO BOX 101		
	BAYPORT	NY	11705
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee Joint  fy by name, address (phone number – optional)	t Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		t Fundraising Representa	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or makes.	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepories: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 153 of 161

h). Joint Fundraisi	ng Participant.		
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	C
•	d Organization, Affiliated Committee, Joint Fun	draising Representativ	e, or Leadership PAC Spons
MANN VICTORY	' FUND 		
	PO BOX 1084		
Mailing Address			
	SALINA	KS KS	67402
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee Joinfly by name, address (phone number – optional)	int Fundraising Represent	Leadership PAC Sp
Connecte		int Fundraising Represent	Leadership PAC Sp
Connecte esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		int Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi	ify by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	ify by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or market	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi Full Name Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank, epository, etc.	ify by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	ng Participant:		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fur	ndraising Representativ	e, or Leadership PAC Spon
LATURNER VIC	TORY FUND		
	<sub> </sub> PO BOX 67237		
Mailing Address			
	TOPEKA 	KS KS	66667
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connecte	ed Organization Affiliated Committee	oint Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi	ed Organization Affiliated Committee July John July July July States (phone number – optional)		ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi			ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or market	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identification Full Name	fy by name, address (phone number – optional)  CITY   Ories: List all banks or other depositories in which	STATE A Telephone Number	ZIP CODE A

Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>	•		
1.		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	I Organization, Affiliated Committee, Joint Fundr or Congress Victory Fund	raising Representative	e, or Leadership PAC Spon
Mailing Address	PO BOX 244		
	CLINTON	, NY	13323
Relationship:	CITY A	STATE A	ZIP CODE A
	52		
	Affiliated Committee	t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Ative Leadership PAC Sp
esignated Agent: Identi		t Fundraising Represent	Ative Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	t Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mail to boxes or mail to boxes or mail to boxes.	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or management and ma	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 156 of 161

h). <b>Joint Fundraisi</b>		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
7.			
ame of Any Connected	l Organization, Affiliated Committee, Joint Fundr	raising Representative	e, or Leadership PAC Spon
ADERHOLT MA	JORITY FUND		
	831 LINWOOD CT		
Mailing Address			
	DIDMINOUAN		25222
51	BIRMINGHAM	AL	35222
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	Affiliated Committee	: Fundraising Representa	ative Leadership PAC Sp
		Fundraising Represent	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi		Fundraising Representation	Leadership PAC Sp
esignated Agent: Identi	fy by name, address (phone number – optional)	STATE A	Leadership PAC Sp
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY		
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)  CITY	STATE A	
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mail to the content of the conte	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mane of Bank,	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A
esignated Agent: Identii  Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank, epository, etc	fy by name, address (phone number – optional)  CITY   CITY   Telepries: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

FEC Form 1S (Revised 02/2017)

(h). <b>Joint Fundraisin</b>	g i artioipanti		
1.		FEC ID number	C
2.		FEC ID number	С
3.		FEC ID number	С
4.		FEC ID number	С
lame of Any Connected DIANA VICTORY	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
<u> </u>			
	I PO BOX 7208		
Mailing Address			
	W. 1000000		27224
	KINGSPORT	TN	37664
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
Connected connec	Affiliated Committee	Fundraising Representa	ative Leadership PAC Sp
esignated Agent: Identify		Fundraising Representa	Leadersnip PAC S
esignated Agent: Identify		Fundraising Representa	Leadersnip PAC S
esignated Agent: Identify		Fundraising Representa	Leadersnip PAC S
esignated Agent: Identify	by name, address (phone number – optional)		
esignated Agent: Identify	by name, address (phone number – optional)	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name    Mailing Address	by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A
Full Name	by name, address (phone number – optional)  CITY   CITY   Te	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b> r				FFC ID	number	
1.					number	C
2.						
3.				FEC ID	number	C
4.				FEC ID	number	C
ame of Any Connected	Organization,	Affiliated Committe	ee, Joint Fund	raising Rep	resentativ	e, or Leadership PAC Spor
GUS BILIRAKIS	VICTORY F	UND				
Mailing Address	PO BOX 248	35				
	SPRINGFIEI	LD			VA	22152
Relationship:		CITY ▲			STATE A	ZIP CODE ▲
Connecte	d Organization	Affiliated Commi	ittee <b>X</b> Join	t Fundraising	Represent	ative Leadership PAC S
esignated Agent: Identif				t Fundraising	Representa	ative Leadership PAC S
				t Fundraising	Represent	ative Leadership PAC S
esignated Agent: Identif				t Fundraising	Represent	ative Leadership PAC S
esignated Agent: Identif				t Fundraising	Represent	ative Leadership PAC S
esignated Agent: Identif	y by name, add	ress (phone numbe	r – optional)			
esignated Agent: Identif	y by name, add	ress (phone numbe	r – optional)		Representation of the second o	
esignated Agent: Identif  Full Name    Mailing Address	y by name, add	ress (phone numbe	r – optional)		STATE A	
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m	y by name, add	ress (phone numbe	r – optional)	S Telephone Nu	ETATE A	
esignated Agent: Identification Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor	y by name, add	ress (phone numbe	r – optional)	S Telephone Nu	ETATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or mame of Bank,	y by name, add	ress (phone numbe	r – optional)	S Telephone Nu	ETATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposite afety deposit boxes or m  ame of Bank, epository, etc.	y by name, add	ress (phone numbe	r – optional)	S Telephone Nu	ETATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 159 of 161

h). <b>Joint Fundraisin</b>		FEC ID number	C
2.		FEC ID number	C
3.		FEC ID number	С
4.		FEC ID number	С
	Organization, Affiliated Committee, Joint Fundr	aising Representative	e, or Leadership PAC Spon
BIGGS VICTORY	COMMITTEE		
Mailing Address	228 S WASHINGTON STREET		
mailing / taureee	SUITE 115		
	ALEXANDRIA	VA	22314
Relationship:	CITY A	STATE ▲	ZIP CODE ▲
Connected	Organization Affiliated Committee X Joint	Fundraising Representa	ative Leadership PAC S
	Organization Affiliated Committee	Fundraising Representa	ative Leadership PAC S
esignated Agent: Identify		Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name		Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optional)	Fundraising Representa	Leadership PAC S
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY		
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   Te	STATE A	ZIP CODE A
esignated Agent: Identify  Full Name	by name, address (phone number – optional)  CITY   CITY   Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional)  CITY   CITY   Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma	by name, address (phone number – optional)  CITY   CITY   Tes: List all banks or other depositories in which	STATE A	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Depositor afety deposit boxes or ma ame of Bank, epository, etc.	by name, address (phone number – optional)  CITY   CITY   Tes: List all banks or other depositories in which	STATE A	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

h). <b>Joint Fundraisi</b>			
1.		FEC ID number	С
2.		FEC ID number	С
3.		FEC ID number	C
4.		FEC ID number	С
	d Organization, Affiliated Committee, Joint Fundament	draising Representativ	e, or Leadership PAC Spon
WAGNER VICTO	ORY COMMITTEE		
	PO BOX 183		
Mailing Address	1 0 300 103		
	HUDSON	WI	54016
Relationship:	CITY ▲	STATE ▲	ZIP CODE ▲
	ed Organization Affiliated Committee Joinfy by name, address (phone number – optional)	int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	ative Leadership PAC S
esignated Agent: Identi		int Fundraising Represent	
esignated Agent: Identi	fy by name, address (phone number – optional)		
esignated Agent: Identi	fy by name, address (phone number – optional)	int Fundraising Represent	
esignated Agent: Identi  Full Name  Mailing Address	fy by name, address (phone number – optional)		
esignated Agent: Identi Full Name Mailing Address	fy by name, address (phone number – optional)	STATE A	
Full Name Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or markets.	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
esignated Agent: Identi  Full Name  Mailing Address  TITLE OR POSITION	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit afety deposit boxes or mame of Bank,	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit affety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A
Full Name  Mailing Address  TITLE OR POSITION  anks or Other Deposit fety deposit boxes or mame of Bank, epository, etc.	fy by name, address (phone number – optional)  CITY   CITY   ories: List all banks or other depositories in whice	STATE A Telephone Number	ZIP CODE A

# Optional Supplemental Information for Lines 5(g) or (h), 6, 8 and/or 9

Page 161 of 161

Mailing Address  TITLE OR POSITION	vries: List all bank	CITY A  ss or other depositories in wheel the state of th	STA		ZIP CODE   ZIP CODE   funds, holds accounts, rent
Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or ma ame of Bank, epository, etc.	vries: List all bank	CITY A	STA	oer	ZIP CODE A
Mailing Address  TITLE OR POSITION  anks or Other Deposito afety deposit boxes or main arms of Bank,	vries: List all bank	CITY A	STA	oer	ZIP CODE A
Mailing Address  TITLE OR POSITION	vries: List all bank	CITY A	STA	oer	ZIP CODE A
Mailing Address			STA		
Mailing Address			STA		
Mailing Address				TE A	
Full Name					
esignated Agent: Identify	y by name, addre	ess (phone number – optional	)		
Connected	d Organization	Affiliated Committee	oint Fundraising R	epresentati	ve Leadership PAC Sp
Relationship:		CITY 🛦	S	TATE A	ZIP CODE ▲
	SHIRLEY			NY	11967
Mailing Address	47 FLINTLOC	K DR			
ame of Any Connected SALAZAR VICTO		ffiliated Committee, Joint Fu ГТ⊏F	ndraising Repres	entative,	or Leadership PAC Spons
4.			FEC ID n	umber (	
			,   FEC ID n	umber (	
3.			FEC ID n	umber (	
			-		